PAGE 1 / 96

Image# 13961659225

FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	For Other Tha	in An Authorize	ea Committee		Office Use Only							
NAME OF COMMITTEE (in full)	TYPE OR PRINT	· —	xample: If typing, ty ver the lines.	pe 12FE4M5								
American Hospital As	sociation PA	C										
ADDRESS (number and street)	325 Seventh S	treet, NW										
Check if different	Suite 700											
than previously reported. (ACC)	Washington			DC L	20004							
2. FEC IDENTIFICATION N	UMBER ▼	CITY 🛦		STATE ▲	ZIP CODE ▲							
C C00106146		3. IS THIS REPOR		OR AM	MENDED )							
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M			20 (M8) Nov 20 (M11) (Non-Election Year Only)							
(a) Quarterly Reports:		Mar 20 (M			20 (M9) Dec 20 (M12) (Non-Election Year Only)							
April 15	O4)	★ Apr 20 (M	4) Jul 20	(M7) Oct	20 (M10) Jan 31 (YE)							
Quarterly Report (	(c) 12-D	eay E-Election	Primary (12P)	General	(12G) Runoff (12R)							
Quarterly Report ( October 15	Q2)	ort for the:	Convention (12C)	Special (	12S)							
Quarterly Report (	Q3)		M M / D	D / Y Y Y Y Y	in the							
Year-End Report (		Election on			State of							
July 31 Mid-Year Report (Non-electi Year Only) (MY)	POS Repo	Pay ST-Election ort for the:	General (30G)	Runoff (3	Special (30S)							
Termination Repor (TER)	t	Election on	M = M / D =	D / Y = Y = Y	in the State of							
5. Covering Period 0	3 01	2013	through	M M / D D / 03 31	2013							
I certify that I have examined t	his Report and to	the best of my kr	nowledge and belief	it is true, correct and	d complete.							
Type or Print Name of Treasure	er Ms. Melinda H	atton										
Signature of Treasurer Ms.	Melinda Hatton		[Electronically Filed	Date 04	18 2013							
NOTE: Submission of false, error	neous, or incomple	te information may	subject the person si	gning this Report to th	ne penalties of 2 U.S.C. §437g.							
Office Use					FEC FORM 3X Rev. 12/2004							

**SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name American Hospital Association PAC 03 01 2013 03 2013 Report Covering the Period: 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2014670.42 January 1, 2013 (b) Cash on Hand at 2154421.95 Beginning of Reporting Period..... 532517.11 251102.90 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 2405524.85 2547187.53 6(a) and 6(c) for Column B)..... 140971.89 282634.57 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 2264552.96 2264552.96 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact:

> Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American	Hospital	Association	PAC
----------	----------	-------------	-----

I. Receipts	COLUMN A	COLUMN B				
<u> </u>	Total This Period	Calendar Year-to-Date				
Contributions (other than loans) From:						
(a) Individuals/Persons Other Than Political Committees						
	83496.21	131571.21				
(i) Itemized (use Schedule A)						
(ii) Unitemized	16413.67	32908.19				
(iii) TOTAL (add	7, 7, 10, 10, 10, 10, 10, 10, 10, 10, 10, 10	7 7				
Lines 11(a)(i) and (ii)▶	99909.88	164479.40				
(b) Political Party Committees	0.00	0.00				
(c) Other Political Committees						
(such as PACs)	0.00	0.00				
(d) Total Contributions (add Lines						
11(a)(iii), (b), and (c)) (Carry		40477040				
Totals to Line 33, page 5)▶	99909.88	164479.40				
Transfers From Affiliated/Other						
Party Committees	150000.00	365500.00				
All 1	0.00	0.00				
All Loans Received	0.00	0.00				
Loan Repayments Received	0.00	0.00				
Offsets To Operating Expenditures						
(Refunds, Rebates, etc.)	0.00	0.00				
(Carry Totals to Line 37, page 5)	0.00	0.00				
Refunds of Contributions Made to Federal Candidates and Other						
Political Committees	1000.00	2000.00				
Other Federal Receipts	1000.00	2000.00				
(Dividends, Interest, etc.)	193.02	537.71				
Transfers from Non-Federal and Levin Funds	193.02	307.71				
(a) Non-Federal Account						
(from Schedule H3)	0.00	0.00				
(		0.00				
(b) Levin Funds (from Schedule H5)	0.00	0.00				
(b) Leviii i unus (iioiii schedule 113)						
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00				
(6) 1818: 114:1818: (444: 18(4) 4:14: 18(5)).	7	3.00				
Total Receipts (add Lines 11(d),						
12, 13, 14, 15, 16, 17, and 18(c))▶	251102.90	532517.11				
Total Federal Receipts						
(subtract Line 18(c) from Line 19)▶	251102.90	532517.11				

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
. Operating Expenditures: —  (a) Allocated Federal/Non-Federal	10101 11110 1 01100	Odicinali Teal to Bate				
Activity (from Schedule H4)						
(i) Federal Share	0.00	0.00				
(ii) Non-Federal Share	0.00	0.00				
(b) Other Federal Operating						
Expenditures	1396.89	1909.57				
(c) Total Operating Expenditures	4200.00	4000 57				
(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	1396.89	1909.57				
Committees	0.00	0.00				
Contributions to Federal Candidates/Committees						
and Other Political Committees	139500.00	280650.00				
Independent Expenditures	0.00	0.00				
(use Schedule E) Coordinated Party Expenditures	0.00	0.00				
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00				
-						
Loan Repayments Made	0.00	0.00				
Loans Made	0.00	0.00				
Refunds of Contributions To: (a) Individuals/Persons Other						
Than Political Committees	75.00	75.00				
#N = W + = + = W	0.00	0.00				
(b) Political Party Committees(c) Other Political Committees	0.00	0.00				
(such as PACs)	0.00	0.00				
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	75.00	75.00				
(add Lines 20(a), (b), and (c))	7					
Other Disbursements	0.00	0.00				
Federal Election Activity (2 U.S.C. §431(20))						
(a) Allocated Federal Election Activity						
(from Schedule H6)						
(i) Federal Share	0.00	0.00				
(ii) "Levin" Share	0.00	0.00				
(b) Federal Election Activity Paid Entirely						
With Federal Funds	0.00	0.00				
(c) Total Federal Election Activity (add	0.00	2.22				
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00				
Total Disbursements (add Lines 21(c), 22,						
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	140971.89	282634.57				
Total Federal Disbursements		, , , , , , , , , , , , , , , , , , , ,				
(subtract Line 21(a)(ii) and Line 30(a)(ii)						
from Line 31)	140971.89	282634.57				

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	99909.88	164479.40
4. Total Contribution Refunds (from Line 28(d))	75.00	75.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	99834.88	164404.40
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1396.89	1909.57
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	1396.89	1909.57

Use separate schedule(s) for each category of the Detailed Summary Page

F	TOTAL HOMBETT				PAGE		6	OF		96	
(0	(check only one)										
	×	11a		11b		11c		12			
		13		14		15		16	;		17

or for commercial purposes, other than using the	he name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
American Hospital Association	1 PAC	
Full Name (Last, First, Middle Initial)  Ms. Dawn Straub		Date of Receipt
Mailing Address 5713 N 115th Circle		03 04 2013
City	State Zip Code	Transaction ID : 20767724
Omaha	NE 68164-1466	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	1
Nebraska Medical Center	Director, Nursing Professional Practic	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial)  Mr. Richard Boone		Date of Receipt
Mailing Address 1923 South Utica Avenue		03 04 2013
City	State Zip Code	Transaction ID : 20769929
Tulsa	OK 74104-5445	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	250.00
Name of Employer	Occupation	
St. John Medical Center	Corporate Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	0.0	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)  Mr. Craig W Jones		Date of Receipt
Mailing Address 4000 Lincoln Boulevard		03 04 _ 2013 _
City	State Zip Code	Transaction ID : 20769933
Oklahoma City	OK 73105-5207	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	925.00
Name of Employer	Occupation	1
Oklahoma Hospital Association	President	]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	205.00	
Other (specify) ▼	925.00	
SUBTOTAL of Receipts This Page (optional)		2175.00
CODICIAL OF THEORIPIS THIS FAGE (OPHORIAL)		
TOTAL This Period (last page this line number	er only)	

Use separate schedule(s)

				PAGE		7	OF		96	
(check only one)										
X	11a		11b		11c		12	!		
	13		14		15		16	;		17

for each category of the **Detailed Summary Page** Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Bruce Lawrence Date of Receipt Mailing Address 3366 NW Expressway, Suite 800 03 04 2013 City Zip Code State Transaction ID: 20769935 OK Oklahoma City 73112-4458 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation **INTEGRIS** Health President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Jimmy Leopard FACHE Date of Receipt Mailing Address P O Box 407 03 04 2013 City State Zip Code Transaction ID: 20769936 OK Wagoner 74477-0407 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Wagoner Community Hospital Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. David D Whitaker FACHE Date of Receipt Mailing Address P O Box 1308 04 2013 03 City State Zip Code Transaction ID: 20769945 OK Norman 73070-1308 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation President and Chief Executive Officer Norman Regional Health System Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the **Detailed Summary Page** 

F					PAGE	8	OF	96	
(c	he	ck only							
	X	11a		11b		11c	12		
		13		14		15	16	;	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Brian K Woodliff Date of Receipt Mailing Address P O Box 1008 03 04 2013 City Zip Code State Transaction ID: 20769946 OK Tahlequah 74465-1008 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation President and Chief Executive Officer Tahlequah City Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Larry W Walker Date of Receipt Mailing Address 4848 Hastings Drive 03 2013 05 City State Zip Code Transaction ID: 20769975 Lake Oswego OR 97035-5745 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Walker Company, The President Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Alan L Goldbloom M.D. Date of Receipt Mailing Address 2525 Chicago Avenue South 2013 03 07

Other (specify) ▼	500.00										
SUBTOTAL of Receipts This Page (optional)	·····			7	Ξ	Ξ	7	_	2000.00	0	
TOTAL This Period (last page this line number	only)	Ξ	I		Ξ	Ι	1	Ι		Ι	

500.00

Zip Code

President and Chief Executive Officer

Aggregate Year-to-Date ▼

55404-4518

State

MN

Occupation

С

500.00

Transaction ID: 20770025

Amount of Each Receipt this Period

City

Minneapolis

Receipt For:

FEC ID number of contributing

Children's Hospitals and Clinics of Mi

General

federal political committee.

Name of Employer

Primary

FOR LINE NUMBER: **PAGE** 9 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

96

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Bill Nelson Date of Receipt Mailing Address 200 North Elm Street P.O. Box A 03 07 2013 City State Zip Code Transaction ID: 20770029 MN Onamia 56359-7901 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Chief Executive Officer Mille Lacs Health System Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Elizabeth T. Beaudin RN, Ph.D., Date of Receipt Mailing Address 69 Day Street 03 07 2013 City State Zip Code Transaction ID: 20770068 CT Granby 06035-2901 Amount of Each Receipt this Period FEC ID number of contributing 350.00 federal political committee. Name of Employer Occupation Connecticut Hospital Association Director, Nursing & Work Force Initiat Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Francis M Saba Date of Receipt Mailing Address 14 Prospect Street 03 01 2013 City Zip Code State Transaction ID: 20770393 MA Milford 01757-3090 Amount of Each Receipt this Period FEC ID number of contributing 750.00 С federal political committee. Name of Employer Occupation Chief Executive Officer Milford Regional Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 1350.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 10 OF 96 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Fred L Hipp Jr. Date of Receipt Mailing Address 1011 Deacon Road 03 2013 08 City State Zip Code Transaction ID: 20770406 08036-3610 Hainesport NJ Amount of Each Receipt this Period FEC ID number of contributing 650.00 federal political committee. Name of Employer Occupation Vice President Government Relations Virtua Voorhees Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Alvin Hoover FACHE Date of Receipt Mailing Address P O Box 948 03 80 2013 City State Zip Code Transaction ID: 20770431 Brookhaven MS 39602-0948 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation King's Daughters Medical Center Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Laurens Sartoris Date of Receipt Mailing Address P O Box 31394 03 80 2013 City Zip Code State Transaction ID: 20770433 Richmond VA 23294-1394 Amount of Each Receipt this Period FEC ID number of contributing 350.00 С federal political committee. Name of Employer Occupation President Virginia Hospital & Healthcare Associa Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

#### SCHEDULE A (FEC Form 3X) **ITEMIZE**

FOR LINE NUMBER: PAGE 11 OF

ED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(che	ck only	one)	Ib	11c	11c 12				
			13	14	4	15	16		17		
ation copied from such Reports and Statements ma	av not be sold or used by any pe	rson f	or the r	ourpo	se of s	olicitino	contribut	ons			

Any informa or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Bobby Arnold Date of Receipt Mailing Address 620 Skyline Drive 08 2013 City State Zip Code Transaction ID: 20770438 TN 38301-3923 Jackson Amount of Each Receipt this Period FEC ID number of contributing 800.00 federal political committee. Name of Employer Occupation President and Chief Executive Officer Jackson-Madison County General Hospita Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Craig A Becker Date of Receipt Mailing Address 500 Interstate Boulevard South Suite 105 03 80 2013 City State Zip Code Transaction ID: 20770439 Nashville TN 37210-4634 Amount of Each Receipt this Period FEC ID number of contributing 800.00 federal political committee. Name of Employer Occupation Tennessee Hospital Association President Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Lanny R Copeland MD Date of Receipt Mailing Address 103 Powell Court, Suite 200 80 2013 03 City Zip Code State Transaction ID: 20770440 TN **Brentwood** 37027-5079 Amount of Each Receipt this Period FEC ID number of contributing C 280.00 federal political committee. Name of Employer Occupation Chief Medical Officer LifePoint Hospitals, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify) 1880.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one) X 11a 11b 11c

96

for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Thomas H Gee Date of Receipt Mailing Address P O Box 1030 03 2013 08 City Zip Code State Transaction ID: 20770442 TN Paris 38242-1030 Amount of Each Receipt this Period FEC ID number of contributing 400.00 federal political committee. Name of Employer Occupation Administrator Henry County Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Patti James Date of Receipt Mailing Address 535 Marriott Drive 03 80 2013 City State Zip Code Transaction ID: 20770446 TN Nashville 37214-5092 Amount of Each Receipt this Period FEC ID number of contributing 400.00 federal political committee. Name of Employer Occupation Tennessee Hospital Association **Board Member** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Jonathan B Perlin MD, PhD Date of Receipt Mailing Address One Park Plaza 80 03 2013 City Zip Code State Transaction ID: 20770448 TN Nashville 37203-6527 Amount of Each Receipt this Period FEC ID number of contributing 800.00 С federal political committee. Name of Employer Occupation President, Clinical and Physician Serv **HCA** Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) 1600.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

96

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Darlene Swart Date of Receipt Mailing Address 500 Interstate Blvd. S 03 2013 08 City Zip Code State Transaction ID: 20770449 TN Nashville 37210-4634 Amount of Each Receipt this Period FEC ID number of contributing 400.00 federal political committee. Name of Employer Occupation Vice President and Clinical Director Tennessee Hospital Association Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Mary Layne Van Cleave Date of Receipt Mailing Address 1208 Brookview Drive 03 80 2013 City State Zip Code Transaction ID: 20770450 TN **Brentwood** 37027-8424 Amount of Each Receipt this Period FEC ID number of contributing 800.00 federal political committee. Name of Employer Occupation Tennessee Hospital Association Executive VP & COO Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Carmela Coyle Date of Receipt Mailing Address 6820 Deerpath Road 03 04 2013 City Zip Code State Transaction ID: 20771509 MD Elkridge 21075-6200 Amount of Each Receipt this Period FEC ID number of contributing 510.00 С federal political committee. Name of Employer Occupation President and CEO Maryland Hospital Association Receipt For: Aggregate Year-to-Date ▼ Primary General 510.00 Other (specify) 1710.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOR LIN	IE NU	MRFK	:	PAGE	: 1	14	O
Use separate schedule(s)	(check o	nly or	ne)					
for each category of the Detailed Summary Page	<b>X</b> 11a		11b		11c		12	
	13		14		15		16	

96

Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by any per the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Associatio	n PAC	
Full Name (Last, First, Middle Initial)  Mr. Thomas W Huebner  Mailing Address 160 Allen Street		Date of Receipt
		03 12 2013
City Rutland	State Zip Code VT 05701-4560	Transaction ID : 20771763
	03/01-4300	_ Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer	Occupation	1
Rutland Regional Medical Center	President	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial)  Mr. Mark P Herzog	•	Date of Receipt
Mailing Address P O Box 1450		03 11 2013
City	State Zip Code	Transaction ID : 20773728
Manitowoc	WI 54221-1450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	1
Holy Family Memorial	President and Chief Executive Officer	
Receipt For:    Primary   General	Aggregate Year-to-Date ▼	
Other (specify)	1000.00	
Full Name (Last, First, Middle Initial)  C. Ms. Maureen Banks RN, MS, M		Date of Receipt
Mailing Address Dove Avenue		03 08 2013
City	State Zip Code MA 01970-2999	Transaction ID: 20773729
Salem	MA 01970-2999	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	562.50
Name of Employer	Occupation	1
Spaulding Rehabilitation Hospital	Chief Operating Officer	
Receipt For:  Primary General	Aggregate Year-to-Date ▼	
Other (specify)	562.50	
SUBTOTAL of Receipts This Page (optional)	····	1912.50
TOTAL This Period (last page this line numb	per only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FO	R LINE	NUN	MBER:	:	PAGE	_ ′	15	OF	96
(ch	eck only	one	e)						
×	11a		11b		11c		12		
	13		14		15		16	;	17

	the name and address of any political committee t	
NAME OF COMMITTEE (In Full)		
American Hospital Association	n PAC	
Full Name (Last, First, Middle Initial)  Mr. Michael E. Sroczynski Esq.		Date of Receipt
Mailing Address 681 East 5th Street #2		03 08 2013
City	State Zip Code	Transaction ID : 20773733
Boston	MA 02127-3201	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	375.00
Name of Employer	Occupation	7
Massachusetts Hospital Association	Vice President, Government Relations	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General	00 0	
Other (specify) ▼	375.00	
Full Name (Last, First, Middle Initial)  Mr. Kim Norton Hollon		Date of Receipt
Mailing Address 680 Centre Street		03 08 2013
City	State Zip Code	7 Transaction ID : 20773737
Brockton	MA 02302-3308	Amount of Each Receipt this Period
FEC ID number of contributing		T
federal political committee.	C	375.00
Name of Employer	Occupation	
Signature Healthcare Brockton Hospital	Chief Executive Officer	]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	375.00	
Full Name (Last, First, Middle Initial)  C. Ms. Karen O Moore MS, RN		Date of Receipt
Mailing Address 40 Main Street Apt. A		03 08 2013
City	State Zip Code	77
Shelburne Falls	MA 01370-1155	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	562.50
Name of Employer	Occupation	1
UMass Memorial-Marlborough Hospital	President and Chief Executive Officer	1
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	500.50	
Other (specify) ▼	562.50	
SUBTOTAL of Receipts This Page (optional)		1312.50
, ,		
IUTAL This Period (last page this line numb	per only)	

# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 16 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and Sta or for commercial purposes, other than using the r		
NAME OF COMMITTEE (In Full) American Hospital Association P	AC	
Full Name (Last, First, Middle Initial)  Ms. Lynn B Nicholas  Mailing Address 5 New England Executive Park  City  Burlington  FEC ID number of contributing federal political committee.  Name of Employer  Massachusetts Hospital Association  Receipt For:  Primary  General  Other (specify)	State Zip Code MA 01803-5010  C  Occupation  President and Chief Executive Officer  Aggregate Year-to-Date ▼  1300.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Ms. Ellen Zane  Mailing Address 800 Washington Street  City  Boston  FEC ID number of contributing federal political committee.  Name of Employer  Tufts Medical Center  Receipt For:  Primary  General  Other (specify)	State Zip Code MA 02111-1552  C  Occupation Vice Chair, Board of Trustees  Aggregate Year-to-Date ▼  750.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Mr. Kevin F Smith  Mailing Address 41 Highland Avenue  City Winchester  FEC ID number of contributing federal political committee.  Name of Employer Winchester Hospital  Receipt For:  Primary General Other (specify)	State Zip Code MA 01890-1446  C  Occupation  President and Chief Executive Officer  Aggregate Year-to-Date ▼  750.00	Date of Receipt  03 08 2013  Transaction ID: 20773741  Amount of Each Receipt this Period  750.00
SUBTOTAL of Receipts This Page (optional)	•	2800.00
TOTAL This Period (last page this line number or	nlv)	

		R LINE			:	PAGE	_ 1	17	OF	96
Use separate schedule(s) for each category of the	`.	ck only	or	1				İ		
Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16	;	17

	Statements may not be sold or used by any personance name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association	PAC	
Full Name (Last, First, Middle Initial)  Ms. Mary Longe  Mailing Address One North Franklin  City Chicago  FEC ID number of contributing federal political committee.  Name of Employer American Hospital Association-Chicago  Receipt For: Primary General Other (specify)	State Zip Code IL 60606-3436  C  Occupation Director  Aggregate Year-to-Date ▼  250.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O3 18 2013  Transaction ID: 20786727  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial)  Mr. Thomas L Bell  Mailing Address 215 Southeast 8th Avenue  City Topeka  FEC ID number of contributing federal political committee.  Name of Employer Kansas Hospital Association  Receipt For:  Primary General Other (specify)	State Zip Code KS 66603-3906  C  Occupation President and Chief Executive Officer  Aggregate Year-to-Date ▼  932.69	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Mr. Fred J. Lucky  Mailing Address 14607 W 89  City Lenexa  FEC ID number of contributing federal political committee.  Name of Employer Kansas Hospital Association  Receipt For:  Primary General Other (specify)	State Zip Code KS 66215-2967  C  Occupation Senior Vice President  Aggregate Year-to-Date ▼  230.76	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1413.45
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 18 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

96

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Steven B. Poage Date of Receipt Mailing Address 3401 SW Alameda 03 2013 15 City State Zip Code Transaction ID: 20786774 KS Topeka 66614-5109 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Vice President/CFO Kansas Hospital Association Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Terry Bridges Date of Receipt Mailing Address One Park Plaza Building 1, 1-E 03 20 2013 City State Zip Code Transaction ID: 20788668 TN Nashville 37203-6527 Amount of Each Receipt this Period FEC ID number of contributing 350.00 federal political committee. Name of Employer Occupation HCA Vice President, Behavioral Health Serv Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. John Gardner Date of Receipt Mailing Address 1000 West 8th Avenue 03 18 2013 City Zip Code State Transaction ID: 20792241 CO Yuma 80759-2641 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Chief Executive Officer Yuma District Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 850.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 19 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

96

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Steven J Summer Date of Receipt Mailing Address 7335 East Orchard Rd, Ste 100 03 2013 City Zip Code State Transaction ID: 20792242 CO Greenwood Village 80111-2512 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation President & Chief Executive Officer Colorado Hospital Association Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Jerry E Jurena Date of Receipt Mailing Address 1622 East Interstate Avenue, Suite 03 21 2013 City State Zip Code Transaction ID: 20792247 ND **Bismarck** 58503-0512 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation North Dakota Hospital Association President Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Stephen M. Ahnen Date of Receipt Mailing Address 125 Airport Road 03 25 2013 City Zip Code State Transaction ID: 20792264 NH Concord 03301-7300 Amount of Each Receipt this Period FEC ID number of contributing 45.50 С federal political committee. Name of Employer Occupation President and CEO New Hampshire Hospital Association Receipt For: Aggregate Year-to-Date ▼ Primary General 227.50 Other (specify) 1045.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 20 OF 96 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Clark Ballard Date of Receipt Mailing Address 1601 Willoughby Road 03 2013 21 City Zip Code State Transaction ID: 20792302 Mason MI 48854-9435 Amount of Each Receipt this Period FEC ID number of contributing 420.00 federal political committee. Name of Employer Occupation Senior Vice President Michigan Health & Hospital Association Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. James Bogan MBA, FACHE Date of Receipt Mailing Address 500 Campus Drive 03 21 2013 City State Zip Code Transaction ID: 20792303 MI Hancock 49930-1569 Amount of Each Receipt this Period FEC ID number of contributing 350.00 federal political committee. Name of Employer Occupation Portage Health President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Georgia R Fojtasek Date of Receipt Mailing Address 205 North East Avenue 03 21 2013 City Zip Code State Transaction ID: 20792304 MI Jackson 49201-1753 Amount of Each Receipt this Period FEC ID number of contributing 350.00 С federal political committee. Name of Employer Occupation President and Chief Executive Officer Allegiance Health Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 1120.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 21 96 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Sean Gehle Date of Receipt Mailing Address 1828 Boston Blvd 03 2013 21 City Zip Code State Transaction ID: 20792305 Lansing MI 48910-1173 Amount of Each Receipt this Period FEC ID number of contributing 262.50 federal political committee. Name of Employer Occupation Vice President Government Relations Providence Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 262.50 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Greg Lane Date of Receipt Mailing Address 1596 South Hill Circle 03 21 2013 City State Zip Code Transaction ID: 20792306 Bloomfield MI 48304-1121 Amount of Each Receipt this Period FEC ID number of contributing 350.00 federal political committee. Name of Employer Occupation McLaren Lapeer Region Senior Vice President and Chief Admini Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Gene Michalski Date of Receipt Mailing Address 3711 West 13 Mile Road 03 21 2013 City Zip Code State Transaction ID: 20792307 MI Royal Oak 48073-6767 Amount of Each Receipt this Period FEC ID number of contributing 350.00 С federal political committee. Name of Employer Occupation Beaumont Hospital - Royal Oak Executive Vice President and Chief Ope Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 962.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 22 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

96

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Mary-Anne D Ponti RN, MS, MB Date of Receipt Mailing Address 3070 Morford Road 03 2013 21 City Zip Code State Transaction ID: 20792308 Petoskey MI 49770-9234 Amount of Each Receipt this Period FEC ID number of contributing 350.00 federal political committee. Name of Employer Occupation McLaren Northern Michigan COO & Chief Nursing Executive Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. John M. Haupert FACHE Date of Receipt Mailing Address 1065 Peachtree Street NE Unit #310 03 22 2013 City State Zip Code Transaction ID: 20792332 GA Atlanta 30309-3923 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Grady Health System President & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Lex S Anderson Date of Receipt Mailing Address 1923 South Utica Avenue 03 22 2013 City Zip Code State Transaction ID: 20792352 OK Tulsa 74104-6502 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Chief Financial Officer St. John Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

FOR	LINE	NU	MBER	:	PAGE	: 2	23	OF	96
(chec	k only	or	ıe)						
X	11a		11b		11c		12		
	13		14		15		16		17

	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association	PAC	
Full Name (Last, First, Middle Initial)  Mr. Sittichoti Bunnag  Mailing Address 700 NW Seventh Street  City Oklahoma City  FEC ID number of contributing	State Zip Code OK 73102-1212	Date of Receipt  03 22 2013  Transaction ID: 20792353  Amount of Each Receipt this Period
federal political committee.  Name of Employer  Valir Rehabilitation Hospital  Receipt For:  Primary  General  Other (specify)	Occupation Board Member  Aggregate Year-to-Date   250.00	250.00
Full Name (Last, First, Middle Initial)  Ms. Shelly Dunham RN  Mailing Address P O Box 489  City Okeene	State Zip Code OK 73763-0489	Date of Receipt  03 22 2013  Transaction ID: 20792354
FEC ID number of contributing federal political committee.  Name of Employer Okeene Municipal Hospital  Receipt For:  Primary General Other (specify)	Occupation Chief Executive Officer  Aggregate Year-to-Date   500.00	Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial)  Mr. Jon Jiles  Mailing Address 700 NW Seventh Street  City Oklahoma City  FEC ID number of contributing federal political committee.  Name of Employer Valir Rehabilitation Hospital  Receipt For:  Primary General Other (specify)	State Zip Code OK 73102-1212  C Occupation Board Member  Aggregate Year-to-Date ▼	Date of Receipt  03 22 2013  Transaction ID: 20792357  Amount of Each Receipt this Period  250.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1000.00
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER: PAGE 24 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

96

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr Jay Johnson Date of Receipt Mailing Address 1202 North Muskogee Place 03 2013 City Zip Code State Transaction ID: 20792358 OK Claremore 74017-3058 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Chief Operating Officer Hillcrest Hospital Claremore Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. David R Stire Date of Receipt Mailing Address 3500 East Frank Phillips Boulevard 03 22 2013 City State Zip Code Transaction ID: 20792382 Bartlesville OK 74006-2411 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Jane Phillips Medical Center President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Christopher Wakely Date of Receipt Mailing Address 700 NW Seventh Street 03 22 2013 City Zip Code State Transaction ID: 20792384 OK Oklahoma City 73102-1212 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation **Board Member** Valir Rehabilitation Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

#### SCHEDULE A (FEC Form 3X) IT

FOR LINE NUMBER: PAGE 25 OF

EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(ch	eck 11 13	,	 ne) 11b 14	11c	12 16	17
ny information copied from such Reports and Statements mar for commercial purposes, other than using the name and a	, , , ,					_		S

0 NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Kate Walsh Date of Receipt Mailing Address One Boston Medical Ctr Place 03 2013 22 City State Zip Code Transaction ID: 20792414 MA **Boston** 02118-2908 Amount of Each Receipt this Period FEC ID number of contributing C 1300.00 federal political committee. Name of Employer Occupation **Boston Medical Center** President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 1300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Paul Summergrad Date of Receipt Mailing Address 800 Washington Street 03 2013 22 City State Zip Code Transaction ID: 20792416 MA **Boston** 02111-1552 Amount of Each Receipt this Period FEC ID number of contributing 262.50 federal political committee. Name of Employer Occupation **Tufts Medical Center** Chairman Psychiatry Receipt For: Aggregate Year-to-Date ▼ Primary General 262.50 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Mark R Tolosky JD, FACHE Date of Receipt Mailing Address 759 Chestnut Street 2013 03 22 City State Zip Code Transaction ID: 20792417 MA Springfield 01199-1001 Amount of Each Receipt this Period FEC ID number of contributing C 750.00 federal political committee. Name of Employer Occupation President and Chief Executive Officer **Baystate Medical Center** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 750.00 2312.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE Use separate schedule(s) (check only one) X 11a 11b 11c

26 OF 96 for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Helene Thibodeau Date of Receipt Mailing Address 216 Nesmith Street 2013 03 22 City Zip Code State Transaction ID: 20792421 Lowell MA 01852-2851 Amount of Each Receipt this Period FEC ID number of contributing 262.50 federal political committee. Name of Employer Occupation Vice President Outpatient Svcs Lowell General Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 262.50 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Joseph White III Date of Receipt Mailing Address 10 Lakeside Terrace 03 22 2013 City State Zip Code Transaction ID: 20792422 Westford MA 01886-1392 Amount of Each Receipt this Period FEC ID number of contributing 375.00 federal political committee. Name of Employer Occupation Lowell General Hospital Executive Vice President & Chief Opera Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. William Wyman Date of Receipt Mailing Address 100 Potash Hill Rd 03 22 2013 City Zip Code State Transaction ID: 20792423 MA Tyngsboro 01879-2710 Amount of Each Receipt this Period FEC ID number of contributing 262.50 С federal political committee. Name of Employer Occupation Lowell General Hospital Director of Revenue Cycle Receipt For: Aggregate Year-to-Date ▼ Primary General 262.50 Other (specify) 900.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 27 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

96

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Scott V. Hartman Date of Receipt Mailing Address 32 Oneida Road 03 2013 22 City Zip Code State Transaction ID: 20792427 Acton MA 01720-2323 Amount of Each Receipt this Period FEC ID number of contributing 262.50 federal political committee. Name of Employer Occupation Vice President, Public Affairs Lahey Hospital & Medical Center, Burli Receipt For: Aggregate Year-to-Date ▼ Primary General 262.50 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Howard R Grant JD, MD Date of Receipt Mailing Address 41 Mall Road 03 22 2013 City State Zip Code Transaction ID: 20792429 MA Burlington 01805-0001 Amount of Each Receipt this Period FEC ID number of contributing 750.00 federal political committee. Name of Employer Occupation Lahey Hospital & Medical Center, Burli President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. John Fernandez Date of Receipt Mailing Address 5 Otis Street 03 22 2013 City Zip Code State Transaction ID: 20792430 MA Needham 02492-3403 Amount of Each Receipt this Period FEC ID number of contributing 750.00 С federal political committee. Name of Employer Occupation Vice President Winchester Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 1762.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

	FOR LINE I	NUMBER:	PAGE	= 28 OI	- 9
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X   11a	11b	11c	12	
zotanou cummary r ago	13	14	15	16	

or for commercial purposes, other than using th	Statements may not be sold or used by any personance and address of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association	PAC	
Full Name (Last, First, Middle Initial)  Ms. Laura J Redoutey  Mailing Address 56640 716th Rd  City Fairbury  FEC ID number of contributing federal political committee.  Name of Employer  Nebraska Hospital Association  Receipt For:  Primary General Other (specify)	State Zip Code NE 68352-4044  C  Occupation President  Aggregate Year-to-Date ▼  500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Mr. Daniel K Anderson  Mailing Address 5200 Fairview Boulevard  City  Wyoming  FEC ID number of contributing federal political committee.  Name of Employer Fairview Lakes Health Services  Receipt For:  Primary  General  Other (specify)	State Zip Code MN 55092-8013  C  Occupation President  Aggregate Year-to-Date ▼	Date of Receipt  03 25 2013  Transaction ID: 20792460  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial)  Mr. Michael A Baumgartner  Mailing Address 1455 St. Francis Avenue  City Shakopee  FEC ID number of contributing federal political committee.  Name of Employer  St. Francis Regional Medical Center  Receipt For:  Primary General Other (specify)	State Zip Code MN 55379-3374  C  Occupation President  Aggregate Year-to-Date ▼  250.00	Date of Receipt  03 25 2013  Transaction ID: 20792462  Amount of Each Receipt this Period  250.00
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	1000.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 29 OF 96 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Peter Jacobson Date of Receipt Mailing Address P O Box 728 03 2013 25 City Zip Code State Transaction ID: 20792475 MN Fergus Falls 56538-0728 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Essentia Health St. Mary's Hospital -President Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Benjamin Koppelman Date of Receipt Mailing Address 600 Pleasant Avenue 03 25 2013 City State Zip Code Transaction ID: 20792488 Park Rapids MN 56470-1431 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation St. Joseph's Area Health Services President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Mary B Maertens FACHE Date of Receipt Mailing Address 300 South Bruce Street 03 25 2013 City Zip Code State Transaction ID: 20792489 MN Marshall 56258-3901 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation President and Chief Executive Officer Avera Marshall Regional Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 30 OF 96 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Daniel B McGinty Date of Receipt Mailing Address 900 Long Lake Road Suite 150 03 2013 25 City Zip Code State Transaction ID: 20792490 MN **New Brighton** 55112-6428 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Administrator Essentia Health St. Mary's Medical Cen Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Charles Mooty Date of Receipt Mailing Address 2450 Riverside Avenue 03 25 2013 City State Zip Code Transaction ID: 20792491 MN Minneapolis 55454-1450 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Fairview Health Services Interim Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. Keith Okeson Date of Receipt Mailing Address 715 Delmore Avenue 03 25 2013 City Zip Code State Transaction ID: 20792492 MN Roseau 56751-1534 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation President and Chief Executive Officer LifeCare Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 31 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

96

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Dr. Terence Pladson MD Date of Receipt Mailing Address 1406 Sixth Avenue North 2013 03 25 City Zip Code State Transaction ID: 20792498 MN Saint Cloud 56303-1900 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation President and Chief Executive Officer CentraCare Health System Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Stephen J Pribyl FACHE Date of Receipt Mailing Address 200 State Avenue 03 25 2013 City State Zip Code Transaction ID: 20792499 MN Faribault 55021-6339 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation District One Hospital Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Tim Rice Date of Receipt Mailing Address 49725 County 83 03 25 2013 City Zip Code State Transaction ID: 20792501 MN Staples 56479-5280 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Lakewood Health System President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 32 OF 96 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Aline M. Holmes Date of Receipt Mailing Address 19 Ashford Drive 03 2013 22 City Zip Code State Transaction ID: 20796479 Plainsboro NJ 08536-3632 Amount of Each Receipt this Period FEC ID number of contributing 1300.00 federal political committee. Name of Employer Occupation Senior VP, Clinical Affairs New Jersey Hospital Association Receipt For: Aggregate Year-to-Date ▼ Primary General 1300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Patricia Ostaszewski MS, CRRN, Date of Receipt Mailing Address 54 Bay Way 03 22 2013 City State Zip Code Transaction ID: 20796492 NJ **Brick** 08723-7361 Amount of Each Receipt this Period FEC ID number of contributing 325.00 federal political committee. Name of Employer Occupation **HEALTHSOUTH Rehabilitation Hospital of** Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. David Phillips Date of Receipt Mailing Address 12451 East 100th Street North 03 22 2013 City State Zip Code Transaction ID: 20798150 OK Owasso 74055-4600 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Chief Executive Officer St. John Owasso Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2125.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 33 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

96

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Rita M. Turley MS, RN Date of Receipt Mailing Address 351 Morningside Lane North 03 2013 City Zip Code State Transaction ID: 20798923 MT Billings 59105-2873 Amount of Each Receipt this Period FEC ID number of contributing 350.00 federal political committee. Name of Employer Occupation **Turley Consulting** President Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Judith R Miller RN, FAAN, Date of Receipt Mailing Address 24 D Alton Place 03 21 2013 City State Zip Code Transaction ID: 20798924 MA **Brookline** 02446 Amount of Each Receipt this Period FEC ID number of contributing 350.00 federal political committee. Name of Employer Occupation **Galloway Consulting** Consultant Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Carol Bradley MSN, RN, C Date of Receipt Mailing Address 1919 NW Lovejoy Street 03 21 2013 City Zip Code State Transaction ID: 20798934 OR Portland 97209-1503 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Senior Vice President and Chief Nursin Legacy Health Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 34 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

96

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Melissa Low RN, MSN Date of Receipt Mailing Address 138 Lorenz Rd 03 2013 21 City Zip Code State Transaction ID: 20798951 TX 78209-2520 San Antonio Amount of Each Receipt this Period FEC ID number of contributing 350.00 federal political committee. Name of Employer Occupation CHRISTUS Santa Rosa Hospital Medical C Administrative Director Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Kathleen D. Sanford RN, DBA Date of Receipt Mailing Address 2659 Syracuse Court 03 22 2013 City State Zip Code Transaction ID: 20799458 CO Denver 80238-2421 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Catholic Health Initiatives Chief Nursing Officer & Senior Vice Pr Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Lois Garner Date of Receipt Mailing Address 1400-6 Lake Pointe Way 03 22 2013 City Zip Code State Transaction ID: 20799543 OH Centerville 45459-5850 Amount of Each Receipt this Period FEC ID number of contributing 350.00 С federal political committee. Name of Employer Occupation Kettering Medical Center Nurse Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 1700.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

	FOR LINE NUMBER:	PAGI
Use separate schedule(s)	(check only one)	
for each category of the	l ` ′ _	٦
Detailed Summary Page	X 11a 11b	11c
		٦

35 OF

96

IEMIZED RECEIPTS	for each category of the Detailed Summary Page	>	11a 13	11b 14	11c 15	12 16	17
Any information copied from such Reports and Statements may be for commercial purposes, other than using the name and a	, , , ,				U		
NAME OF COMMITTEE (In Full) American Hospital Association PAC							

Full Name (Last, First, Middle Initial)		
Mr. Lee T Myles		Date of Receipt
Mailing Address P O Box 291  City	State Zip Code	03 27 2013
Lewiston	ME 04243-0291	Transaction ID : 20800007
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer	Occupation	
St. Mary's Regional Medical Center	Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)  Ms. Claire Murray		Date of Receipt
Mailing Address 1501 Twelfth Ave.		03 27 2013
City	State Zip Code	Transaction ID: 20800039
Watervliet	NY 12189-2402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer	Occupation	
New York Organization Nurse Executives	Executive Director	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)  . Ms. Katherine Keene		Date of Receipt
Mailing Address 3861 St. Andrew's Loop		03 27 2013
City Salem	State         Zip Code           OR         97302-9498	Transaction ID : 20800040  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	350.00
Name of Employer	Occupation	
Salem Health	Trustee	
Receipt For:    Primary   General	Aggregate Year-to-Date ▼	
Other (specify) ▼	350.00	
	)	1050.00

FOR LINE NUMBER: PAGE 36 OF 96 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Drew Sones Date of Receipt Mailing Address 14945 Janine Dr. 03 2013 27 City State Zip Code Transaction ID: 20800041 CA Whittier 90605-1708 Amount of Each Receipt this Period FEC ID number of contributing 350.00 federal political committee. Name of Employer Occupation **Board Member** Presbyterian Intercommunity Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Patty White RN, MS Date of Receipt Mailing Address 475 South Dobson Road 03 29 2013 City State Zip Code Transaction ID: 20800042 ΑZ Chandler 85224-5605 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation St. Joseph's Hospital and Medical Cent President Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mrs. Kristin Feliciano Date of Receipt Mailing Address 9626 Kensington PKWY 03 29 2013

City Zip Code State Transaction ID: 20800043 MD Kensington 20895-3517 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation VP & Administrator of Adult Specialty Inova Fairfax Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify)

FOR LINE NUMBER: PAGE 37 OF 96 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Elaine Couture BSN, MBA, Date of Receipt Mailing Address P O Box 2555 03 20 2013 City Zip Code State Transaction ID: 20800044 WA Spokane 99220-2555 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Providence Sacred Heart Medical Center Chief Executive Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Spencer L. Grover Date of Receipt Mailing Address 3636 Emily Way 03 27 2013 City State Zip Code Transaction ID: 20800047 IN Carmel 46033-4442 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Indiana Hospital Association Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Douglas J Leonard Date of Receipt Mailing Address 4319 Benthaven Dr. East 2013 03 27 City Zip Code State Transaction ID: 20800048 IN Bargersville 46106 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Indiana Hospital Association President Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

EOD LINE NUMBER: DAGE 39 OF

	11	_	LIIVE				IAGE		0 0		00
	Use separate schedule(s)	(check only one)									
	for each category of the	l `	¬ ´		,	_	r		i		
	Detailed Summary Page	l IX	11a		11b		11c		12		
	Detailed Suffiffiary Page		1	$\vdash$	-	Н	-	-		_	1
			13		14		15		16		17
ments may not be cold as used by any payon for the purpose of coliciting contributions											

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Kevin Speer Date of Receipt Mailing Address 146 Capital Drive Apt. C 03 2013 27 City State Zip Code Transaction ID: 20800049 IN Avon 46123-4538 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Chief Executive Officer Hendricks Regional Health Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Brian Tabor Date of Receipt Mailing Address 10762 Forest Lake Court 03 2013 27 City State Zip Code Transaction ID: 20800050 IN Indianapolis 46278-9610 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Indiana Hospital Association Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mrs. Bernice C. Ulrich Date of Receipt Mailing Address 4655 Running Brook Terrace 2013 03 27 City State Zip Code Transaction ID: 20800051 IN Greenwood 46143-9255 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Vice President Indiana Hospital Association Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 39 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

96

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Bryan J Bucklew Date of Receipt Mailing Address 2 Riverplace, Suite 400 03 2013 28 City Zip Code State Transaction ID: 20800053 OH Dayton 45405-4936 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Greater Dayton Area Hospital Associati President Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Cheryl L. Hoying Ph.D., RN, Date of Receipt Mailing Address 1241 Ashland Avenue 03 28 2013 City State Zip Code Transaction ID: 20800054 OH Dayton 45420-1503 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Cincinnati Children's Hospital Medical Senior Vice President, Patient Care Se Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Scott C Malaney Date of Receipt Mailing Address 1900 South Main Street 03 28 2013 City Zip Code State Transaction ID: 20800055 OH Findlay 45840-1214 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation President and Chief Executive Officer Blanchard Valley Health System Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 40 OF Use separate schedule(s) (check only one) X 11a 11b 11c 12

96

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Dale E Thornton MPH, CHE Date of Receipt Mailing Address 45 St Lawrence Drive 2013 03 28 City Zip Code State Transaction ID: 20800056 OH Tiffin 44883-8310 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 federal political committee. Name of Employer Occupation President and Chief Executive Officer Mercy Tiffin Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Reezie DeVet RN, PhD Date of Receipt Mailing Address 281 Rolling Hills Lane 03 29 2013 City State Zip Code Transaction ID: 20800061 MI Petoskey 49770-9602 Amount of Each Receipt this Period FEC ID number of contributing 350.00 federal political committee. Name of Employer Occupation McLaren Northern Michigan President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. David B. Jahn Date of Receipt Mailing Address 3341 Lakeshore Drive 03 29 2013 Zip Code State Transaction ID: 20800062 MI Sault Sainte Marie 49783-1111 Amount of Each Receipt this Period FEC ID number of contributing 350.00 С federal political committee. Name of Employer Occupation Chief Executive Officer War Memorial Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 3200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 41 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

96

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Barbara Rossmann RN Date of Receipt Mailing Address 15855 19 Mile Road 2013 03 29 City Zip Code State Transaction ID: 20800067 Clinton Township MI 48038-3504 Amount of Each Receipt this Period FEC ID number of contributing 525.00 federal political committee. Name of Employer Occupation President and Chief Executive Officer Henry Ford Macomb Hospitals Receipt For: Aggregate Year-to-Date ▼ Primary General 525.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Stephen R Mason Date of Receipt Mailing Address 16255 Bay Vista Dr 03 28 2013 City State Zip Code Transaction ID: 20800107 FL Clearwater 33760-3127 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 federal political committee. Name of Employer Occupation BayCare Health System President & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Stephen A Purves FACHE Date of Receipt Mailing Address 1500 Sw 1St Ave 2013 03 28 City State Zip Code Transaction ID: 20800108 FL Ocala 34471-6504 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation President and Chief Executive Officer Munroe Regional Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 4025.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NOMBER: (check only one)

TOTT EITHE TOTTIBETT					PAGE	- 4	12	OF	96	
(0	(check only one)									
	X	11a		11b		11c		12		
		13		14		15		16	;	17

Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any pers the name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Associatio	n PAC	
Full Name (Last, First, Middle Initial)  Mr. William A. Bell  Mailing Address 944 Gentian Court		Date of Receipt
		03 28 2013
City Tallahassee	State Zip Code FL 32312-1228	Transaction ID : 20800109
	1 L J2J12-1220	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	1
Florida Hospital Association	General Counsel	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial)  3. Mr. Ralph Glatfelter		Date of Receipt
Mailing Address 7285 Heartland Circle		03 28 2013
City	State Zip Code	Transaction ID: 20800110
Tallahassee	FL 32312-7501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	225.00
Name of Employer	Occupation	1
Florida Hospital Association	Senior Vice President	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	225.00	
Full Name (Last, First, Middle Initial)  C. Ms. Kim Streit		Date of Receipt
Mailing Address 1317 Eastin Avenue		03 28 2013
City	State Zip Code	Transaction ID: 20800111
Orlando	FL 32804-6309	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer	Occupation	-
Florida Hospital Association - Orlando	VP, Health Research & Information	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	750.00	
SUBTOTAL of Receipts This Page (optional)		1975.00
TOTAL This Period (last page this line numb	er only)	

FOR LINE NUMBER: PAGE 43 OF Use separate schedule(s) (check only one) X 11a 11b 11c 12

96

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Kathy A. Reep Date of Receipt Mailing Address 19 W. New Hampshire 03 2013 28 City State Zip Code Transaction ID: 20800112 FL Orlando 32804-5911 Amount of Each Receipt this Period FEC ID number of contributing 750.00 federal political committee. Name of Employer Occupation Vice President, Financial Services Florida Hospital Association - Orlando Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Rich Rasmussen Date of Receipt Mailing Address 405 El Destinado Drive 03 28 2013 City State Zip Code Transaction ID: 20800113 FL Tallahassee 32301-1522 Amount of Each Receipt this Period FEC ID number of contributing 1001.00 federal political committee. Name of Employer Occupation Florida Hospital Association VP for Strategic Communications Receipt For: Aggregate Year-to-Date ▼ Primary General 1001.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Paul Belcher Date of Receipt Mailing Address Route 15 Box 241 03 28 2013 City State Zip Code Transaction ID: 20800114 FL Tallahassee 32311 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 С federal political committee. Name of Employer Occupation Senior Vice President Florida Hospital Association Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) 2951.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 44 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and State or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) American Hospital Association F	PAC	
Full Name (Last, First, Middle Initial)  Ms. Martha DeCastro RN, MS, CI  Mailing Address 1036 Alameda Drive  City  Tallahassee  FEC ID number of contributing federal political committee.  Name of Employer  Florida Hospital Association  Receipt For:  Primary  General  Other (specify)	State Zip Code FL 32317-9577  C  Occupation Vice President for Nursing  Aggregate Year-to-Date ▼  750.00	Date of Receipt  03 28 2013  Transaction ID: 20800115  Amount of Each Receipt this Period  750.00
Full Name (Last, First, Middle Initial)  Mr. John Wilgis  Mailing Address 307 Park Lake Circle  City  Orlando  FEC ID number of contributing federal political committee.  Name of Employer  Florida Hospital Association  Receipt For:  Primary  General  Other (specify)	State Zip Code FL 32803-3923  C  Occupation Director, Emergency Mgmt. Svcs.  Aggregate Year-to-Date ▼  1200.00	Date of Receipt  03 28 2013  Transaction ID : 20800116  Amount of Each Receipt this Period  1200.00
Full Name (Last, First, Middle Initial)  Mr. Bruce J Rueben  Mailing Address 306 East College Avenue  City Tallahassee  FEC ID number of contributing federal political committee.  Name of Employer Florida Hospital Association  Receipt For:  Primary General Other (specify)	State Zip Code FL 32301-1522  C  Occupation President  Aggregate Year-to-Date ▼  1500.00	Date of Receipt  03 28 2013  Transaction ID: 20800117  Amount of Each Receipt this Period  1500.00
SUBTOTAL of Receipts This Page (optional)		3450.00
TOTAL This Period (last page this line number of	only)	

FOR LINE NUMBER: PAGE 45 OF Use separate schedule(s) (check only one) X 11a 11b 11c 12

96

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms Barbara Flynn Date of Receipt Mailing Address 307 Park Lake Circle 2013 03 28 City State Zip Code Transaction ID: 20800122 FL Orlando 32803-3923 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation VP, Health Info Mgmt Services Florida Hospital Association Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Christine Johnson Date of Receipt Mailing Address 306 East College Avenue 03 28 2013 City State Zip Code Transaction ID: 20800131 FL Tallahassee 32301-1522 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Florida Hospital Association Director of Advocacy Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Linda S Quick Date of Receipt Mailing Address 6030 Hollywood Boulevard, Suite 14 03 28 2013 City State Zip Code Transaction ID: 20800135 FL Hollywood 33024-7923 Amount of Each Receipt this Period FEC ID number of contributing 295.00 С federal political committee. Name of Employer Occupation President South Florida Hospital and Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 295.00 Other (specify) 1095.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

### SCHEDULE A (FEC Form 3X) 17

FOR LINE NUMBER: PAGE 46 OF

TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	`	ck only 11a 13	y one) 11b 14	11c	12 16		17
ny information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions of commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)								

Full Name (Last First Middle Initial)		
Full Name (Last, First, Middle Initial) Mr. John A Matessino		Date of Receipt
Mailing Address 9521 Brookline Avenue	Ctota 7in Coda	03 27 2013
City Baton Rouge	State Zip Code LA 70809-8409	Transaction ID : 20800138
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer	Occupation	7
Louisiana Hospital Association	President & Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1250.00	
Full Name (Last, First, Middle Initial) Ms. Teri G Fontenot FACHE		Date of Receipt
Mailing Address P O Box 95009		03 27 2013
City	State Zip Code	Transaction ID: 20800139
Baton Rouge	LA 70895-9009	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer	Occupation	7
Woman's Hospital	President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2500.00	
Full Name (Last, First, Middle Initial) Mr. Sean M. Prados FACHE		Date of Receipt
Mailing Address 9521 Brookline Avenue		03 27 2013
City	State Zip Code	Transaction ID : 20800140
Baton Rouge	LA 70809-8409	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer	Occupation	_
Louisiana Hospital Association	Executive Vice President	
Receipt For:  Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	750.00	
SUBTOTAL of Receipts This Page (options	al)	4500.00

# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: (check only one) PAGE 47 OF 96 Use separate schedule(s)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam		
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Lake Charles  FEC ID number of contributing federal political committee.  Name of Employer  Lake Charles Memorial Hospital  Present For:	State Zip Code  A 70601-8911  cupation sident and Chief Executive Officer gregate Year-to-Date ▼  500.00	Date of Receipt  03 27 2013  Transaction ID: 20800141  Amount of Each Receipt this Period  500.00
Metairie  FEC ID number of contributing federal political committee.  Name of Employer Metropolitan Hospital Council of New O  Chic	Cupation ef Executive Officer gregate Year-to-Date ▼  750.00	Date of Receipt  03 27 2013  Transaction ID: 20800142  Amount of Each Receipt this Period  750.00
Alexandria  FEC ID number of contributing federal political committee.  Name of Employer  CHRISTUS St. Patrick Hospital of Lake  Present For:	State Zip Code  _A 71301-3841  cupation esident and Chief Executive Officer gregate Year-to-Date   750.00	Date of Receipt  03 27 2013  Transaction ID : 20800378  Amount of Each Receipt this Period  750.00
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	2000.00
TOTAL This Period (last page this line number only).		

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

FOR LINE NUMBER:				PAGE	-	48	OF	96	
(che	(check only one)								
X	11a		11b		11c		12		
	13		14		15		16		17

	Statements may not be sold or used by any person ename and address of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association	PAC	
Full Name (Last, First, Middle Initial)  Mr. Steve Worley  Mailing Address 200 Henry Clay Avenue		Date of Receipt  M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City New Orleans	State Zip Code LA 70118-5798	Transaction ID : 20800379  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer  Children's Hospital  Receipt For:  Primary General  Other (specify) ▼	Occupation President and Chief Executive Officer  Aggregate Year-to-Date ▼  750.00	
Full Name (Last, First, Middle Initial)  Mr. John William Davis MBA  Mailing Address 1001 Gause Boulevard		Date of Receipt  03 27 2013
City Slidell FEC ID number of contributing	State Zip Code LA 70458-2939	Transaction ID : 20800380  Amount of Each Receipt this Period
federal political committee.  Name of Employer Slidell Memorial Hospital	Occupation Chief Executive Officer	250.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  Ms. Nancy R Hellyer RN, FACHE		Date of Receipt
Mailing Address P O Box 589  City Coushatta  FEC ID number of contributing	State Zip Code LA 71019-0589	03 27 2013  Transaction ID: 20800381  Amount of Each Receipt this Period
federal political committee.  Name of Employer	Occupation	250.00
CHRISTUS Coushatta Health Care Center Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Chief Administration Officer  Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	1250.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 49 OF 96 Use separate schedule(s) (check only one) X 11a 11b 11c 12

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. William Adcock Date of Receipt Mailing Address P O Box 398 03 2013 27 City Zip Code State Transaction ID: 20800382 Farmerville LA 71241-0398 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Chief Financial Officer Union General Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. K Scott Wester FACHE Date of Receipt Mailing Address 5000 Hennessy Boulevard 03 27 2013 City State Zip Code Transaction ID: 20801199 LA **Baton Rouge** 70808-4375 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Our Lady of the Lake Regional Medical President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Donald Lloyd Date of Receipt Mailing Address P O Box 3401 03 27 2013 City Zip Code State Transaction ID: 20801200 Lake Charles LA 70602-3401 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Administrator CHRISTUS St. Patrick Hospital of Lake Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 50 OF Use separate schedule(s) (check only one) X 11a 11b 11c 12

96

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr Parker Templeton Date of Receipt Mailing Address 1514 Jefferson Highway 03 2013 27 City Zip Code State Transaction ID: 20801201 **New Orleans** LA 70121-2429 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Chief Executive Officer Franklin Foundation Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Todd Delahoussaye MBA Date of Receipt Mailing Address 1701 Oak Park Boulevard 03 27 2013 City State Zip Code Transaction ID: 20801202 Lake Charles LA 70601-8911 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Lake Charles Memorial Hospital Sr. VP, Specialty & Physician Services Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. William F Barrow II Date of Receipt Mailing Address 611 Saint Landry St 03 27 2013 City Zip Code State Transaction ID: 20801203 LA Lafayette 70506-4627 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation President and Chief Executive Officer Our Lady of Lourdes Regional Medical C Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 51 Use separate schedule(s) (check only one) X 11a 11b 11c 12 96

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Bernita Loyd- Brown, LD, LDN Date of Receipt Mailing Address 1701 Oak Park Blvd 03 2013 27 City Zip Code State Transaction ID: 20801206 70601-8911 Lake Charles LA Amount of Each Receipt this Period FEC ID number of contributing 225.00 federal political committee. Name of Employer Occupation Lake Charles Memorial Hospital Vice President, Support Services Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Marilyn McSwain RNC, MSN Date of Receipt Mailing Address 1900 West Gauthier Road 03 27 2013 City State Zip Code Transaction ID: 20801207 Lake Charles LA 70605-7170 Amount of Each Receipt this Period FEC ID number of contributing 225.00 federal political committee. Name of Employer Occupation Lake Charles Memorial Hospital for Wom Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dr. Kevin Mocklin MD Date of Receipt Mailing Address 1701 Oak Park Boulevard 03 27 2013 City Zip Code State Transaction ID: 20801208 Lake Charles LA 70601-8911 Amount of Each Receipt this Period FEC ID number of contributing 225.00 С federal political committee. Name of Employer Occupation **Director Medical Staff** Lake Charles Memorial Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) 675.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 52 OF Use separate schedule(s) (check only one) X 11a 11b 11c 12

96

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Michele L Gougeon Date of Receipt Mailing Address 115 Mill Street 2013 03 29 City Zip Code State Transaction ID: 20801226 Belmont MA 02478-1064 Amount of Each Receipt this Period FEC ID number of contributing 375.00 federal political committee. Name of Employer Occupation McLean Hospital Executive Vice President and Chief Ope Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Trish Hannon FACHE Date of Receipt Mailing Address 125 Parker Hill Avenue 03 29 2013 City State Zip Code Transaction ID: 20801228 MA Roxbury Crossing 02120-2847 Amount of Each Receipt this Period FEC ID number of contributing 750.00 federal political committee. Name of Employer Occupation New England Baptist Hospital President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Peter J Holden Date of Receipt Mailing Address 275 Sandwich Street 03 29 2013 City Zip Code State Transaction ID: 20801229 MA Plymouth 02360-2183 Amount of Each Receipt this Period FEC ID number of contributing 1125.00 С federal political committee. Name of Employer Occupation President and Chief Executive Officer Jordan Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 1125.00 Other (specify) 2250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 53 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

96

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Michael K Lauf MBA Date of Receipt Mailing Address 88 Lewis Bay Road 03 2013 29 City Zip Code State Transaction ID: 20801232 Hyannis MA 02601-5210 Amount of Each Receipt this Period FEC ID number of contributing 750.00 federal political committee. Name of Employer Occupation President and Chief Executive Officer Cape Cod Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Robert G Norton CHE Date of Receipt Mailing Address 81 Highland Avenue 03 29 2013 City State Zip Code Transaction ID: 20801234 MA Salem 01970-2768 Amount of Each Receipt this Period FEC ID number of contributing 375.00 federal political committee. Name of Employer Occupation North Shore Medical Center President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Joel Rudin Date of Receipt Mailing Address 3 Webster Street 03 29 2013 City Zip Code State Transaction ID: 20801235 MA Winchester 01890-2117 Amount of Each Receipt this Period FEC ID number of contributing 375.00 С federal political committee. Name of Employer Occupation Chief Executive Officer New England Rehabilitation Hospital Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE I	NUMBER:	:   PAGI	= 54 OF	- 9			
	(check only	one)						
Jse separate schedule(s) for each category of the Detailed Summary Page	X 11a 11b 11c 12							
	13	14	15	16				

	d Statements may not be sold or used by any per- the name and address of any political committee t	
NAME OF COMMITTEE (In Full) American Hospital Associatio	n PAC	
Full Name (Last, First, Middle Initial)  Mr. David Spackman		Date of Receipt
Mailing Address 110 Wheeler Pond Rd		03 29 2013
City Orange	State Zip Code MA 01364-9401	Transaction ID : 20801236
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  262.50
Name of Employer  Lahey Clinic Medical Center  Receipt For:  Primary General  Other (specify) ▼	Occupation Senior Vice President Govt. Affairs  Aggregate Year-to-Date ▼  337.50	
Full Name (Last, First, Middle Initial)  Mr. Dirk O'Hara  Mailing Address 1126 Rambling Oaks Dr		Date of Receipt
City	State Zip Code	03 22 2013 Transaction ID : 20803345
Norman  FEC ID number of contributing federal political committee.	OK 73072-4134	Amount of Each Receipt this Period
Name of Employer Valir Rehabilitation Hospital	Occupation Board Member	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  Ms. Melinda Reid Hatton		Date of Receipt
Mailing Address 325 Seventh Street, NW Suite 700		03 31 2013
City Washington	State Zip Code DC 20004-2818	Transaction ID : PR1045726227794  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	76.94
Name of Employer  American Hospital Association-Washingt	Occupation Senior Vice President & General Counse	_
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  230.82	P/R Deduction (\$38.47 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	589.44
TOTAL This Period (last page this line numb	er only)	

	FOF	R LINE	NU	IMBER	:	PAGE	5	55 OI	F	96
	(che	ck only	or	ne)						
Use separate schedule(s) for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		117

	and Statements may not be sold or used by any pers og the name and address of any political committee t	
NAME OF COMMITTEE (In Full)		
American Hospital Associati	on PAC	
Full Name (Last, First, Middle Initial)  A. Mr. David Schulke		Date of Receipt
Mailing Address 325 Seventh Street, NW		M M / D D / Y Y Y Y Y
Suite 700 City	State Zip Code	03 31 2013 Transaction ID : PR1057462127794
Washington	DC 20004-2801	Transaction ID : PR1057462127794  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	76.94
Name of Employer	Occupation	-
American Hospital Association-Washingt	VP Research Programs	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$38.47 Bi-Weekly)
Full Name (Last, First, Middle Initial)  Mr. Dale A Kirby MHA		Date of Receipt
Mailing Address P O Box 331		M = M / D = D / Y = Y = Y
City	State Zip Code	03 31 2013
City Colusa	State Zip Code CA 95932-0331	Transaction ID: PR1125892327794  Amount of Each Receipt this Period
		Amount of Lacri neceipt this Period
FEC ID number of contributing federal political committee.	C	76.94
Name of Employer	Occupation	]
American Hospital Association-Chicago	Regional Executive	_
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  230.82	P/R Deduction (\$38.47 Bi-Weekly)
Full Name (Last, First, Middle Initial)  C. Ms. Stephanie H. Drake		Date of Receipt
Mailing Address One North Franklin		03 31 2013
City	State Zip Code	Transaction ID : PR1492459927794
Chicago	IL 60606-3436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	76.94
Name of Employer	Occupation	-
American Hospital Association-Chicago	Associate Executive Director - ASHHRA	]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	230.82	P/R Deduction (\$38.47 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional	al)	230.82
TOTAL This Period (last page this line pur	mber only)	
show have page this inte that	· · · · · · · · · · · · · · · · · · ·	

FOR LINE NUMBER: PAGE 56 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12

96

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Erik Rasmussen Date of Receipt Mailing Address 325 Seventh Street, NW Suite 700 2013 31 City Zip Code State Transaction ID: PR1819487927794 DC Washington 20004-2801 Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Name of Employer Occupation American Hospital Association-Washingt Senior Associate Director Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) Full Name (Last, First, Middle Initial) **B.** Ms. Linda Fishman Date of Receipt Mailing Address 325 Seventh Street, NW Suite 700 03 31 2013 City State Zip Code Transaction ID: PR327629127794 DC Washington 20004-2818 Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Name of Employer Occupation American Hospital Association-Washingt Senior Vice President, Public Policy Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Michael P. McCue Date of Receipt Mailing Address 122 N. Greenwood Avenue 03 31 2013 City Zip Code State Transaction ID: PR327771627794 IL Park Ridge 60068-3227 Amount of Each Receipt this Period FEC ID number of contributing 76.94 С federal political committee. Name of Employer Occupation American Hospital Association-Chicago Associate Director Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) 230.82 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 

FOR LINE NUMBER: PAGE 57 OF 96 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Debra J. Stock Date of Receipt Mailing Address 1022 S. Harvey Avenue 2013 31 City State Zip Code Transaction ID: PR327777827794 Oak Park IL 60304-2132 Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Name of Employer Occupation American Hospital Association-Chicago Vice President, Member Relations Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Pamela Austin Thompson RN, MSN Date of Receipt Mailing Address 325 Seventh Street, NW Suite 700 03 31 2013 City State Zip Code Transaction ID: PR327812027794 DC Washington 20004-2818 Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Name of Employer Occupation American Hospital Association-Washingt Chief Executive Officer, AONE & Sr. Vi Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Mark Seklecki Date of Receipt Mailing Address 325 Seventh Street, NW 03 31 2013 Suite 700 City Zip Code State Transaction ID: PR327858027794 DC Washington 20004-2818 Amount of Each Receipt this Period FEC ID number of contributing 76.94 С federal political committee. Name of Employer Occupation American Hospital Association-Washingt Vice President, Political Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) 230.82 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

FOR LINE NUMBER: PAGE 58 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

96

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. John F. Barry Date of Receipt Mailing Address One North Franklin 2013 31 City Zip Code State Transaction ID: PR327877827794 Millis MA 60606-3436 Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Name of Employer Occupation American Hospital Association-Chicago Regional Executive Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. George F. Bergstrom Date of Receipt Mailing Address 130 North Garland Court #3002 03 31 2013 City State Zip Code Transaction ID: PR327895727794 IL Chicago 60602-4750 Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Name of Employer Occupation American Hospital Association-Chicago Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Richard J. Umbdenstock Date of Receipt Mailing Address 325 Seventh Street, NW 03 31 2013 Suite 700 City Zip Code State Transaction ID: PR328132827794 DC Washington 20004-2818 Amount of Each Receipt this Period FEC ID number of contributing 76.94 С federal political committee. Name of Employer Occupation President and Chief Executive Officer American Hospital Association-Washingt Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) 230.82 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

	FOF	LINE	NU	IMBER	:	PAGE	: :	59 O	F	96
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	×	11a		11b		11c		12		
		13		14		15		16		17

	d Statements may not be sold or used by any pers the name and address of any political committee t	
NAME OF COMMITTEE (In Full)		
American Hospital Association	1 PAC	
Full Name (Last, First, Middle Initial)  Ms. Barbara Lorsbach		Date of Receipt
Mailing Address 204 7th Ave		03 31 2013
City	State Zip Code	Transaction ID : PR328136927794
La Grange	IL 60525-6406	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	76.94
Name of Employer	Occupation	1
American Hospital Association-Chicago	Sr. Vice President, Member Relations	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  230.82	P/R Deduction (\$38.47 Bi-Weekly)
Full Name (Last, First, Middle Initial)  Ms. Donna J. Melkonian		Date of Receipt
Mailing Address 5545 North Wayne		M = M / D = D / Y = Y = Y
City	State Zip Code	03 31 2013
Chicago	State Zip Code IL 60640-1318	Transaction ID : PR328223827794
Chicago	IL 60640-1318	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	76.94
Name of Employer	Occupation	1
American Hospital Association-Chicago	Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  230.82	P/R Deduction (\$38.47 Bi-Weekly)
Full Name (Last, First, Middle Initial)  C. Mr. Ron O. Purcell		Date of Receipt
Mailing Address 1093 N. Faldo Way		03 31 2013
City	State Zip Code	Transaction ID : PR328241427794
Eagle	ID 83616-5369	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	76.94
Name of Employer	Occupation	-
American Hospital Association-Chicago	Regional Executive	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	230.82	P/R Deduction (\$38.47 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional).	<b>&gt;</b>	230.82
TOTAL This Pariod (last nage this line number	er only)	
I THE THIS I CHOU (last page this line hullibe	or orny/	

	FOF	R LINE	NU	IMBER	:	PAGE	. 6	60 OI	F	96
Use separate schedule(s)	(check only one)									
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Richard J. Pollack Date of Receipt Mailing Address 3475 North Venice Street 31 2013 City State Zip Code Transaction ID: PR328260927794 VA 22207-4446 Arlington Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Name of Employer Occupation American Hospital Association-Washingt **Executive Vice President** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) Other (specify) 230.82

		,	
В.	Full Name (Last, First, Middle Initial) Ms. Carolyn Forcina		Date of Receipt
	Mailing Address 200 Clover Hill Court		03 31 2013
	City	State Zip Code	Transaction ID : PR328511827794
	Yardley	PA 19067-5736	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	76.94
	Name of Employer	Occupation	
	American Hospital Association-Chicago	Regional Executive	
	Receipt For:		
	Primary General	Aggregate Year-to-Date ▼	P/R Deduction (\$38.47 Bi-Weekly)
	Other (specify)	230.82	F/N Deduction (\$36.47 Bi-Weekly)
		7	
<u> </u>	Full Name (Last, First, Middle Initial)  Ms. Alicia N. Mitchell		Date of Receipt
	Mailing Address 1501 N. Harrison Street		03 31 2013
	City	State Zip Code	Transaction ID : PR328512027794
	Arlington	VA 22205-2726	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	76.94
	Name of Employer	Occupation	
	American Hospital Association-Washingt	Senior Vice President, Communications	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	Aggregate real to bate \$	P/R Deduction (\$38.47 Bi-Weekly)
	Other (specify)	230.82	The Deduction (Good in St. Woodly)
Г			
١,	NIDTOTAL of Desciols This Description (authors)		230.82

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

American Hospital Association-Chicago

General

Receipt For:

Primary

	FOR LINE NUMBER:				PAGE	6	1 C	)F 96
Use separate schedule(s) for each category of the	(check	only or	ne)					
Detailed Summary Page	<b>X</b> 1	1a	11b		11c		12	
,	1	3	14		15		16	□ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Anthony J. Burke Date of Receipt Mailing Address One North Franklin Ave. 31 2013 City State Zip Code Transaction ID: PR328913327794 IL Chicago 60606 Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Name of Employer Occupation President & CEO, AHA Solutions, Inc. & American Hospital Association-Chicago Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. John R. Combes Date of Receipt Mailing Address One North Franklin 03 31 2013 City State Zip Code Transaction ID: PR329071327794 IL 60606-3436 Chicago Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Name of Employer Occupation

Other (specify) ▼	230.82	, , , , , ,
Full Name (Last, First, Middle Initial)  C. Mr. W. Thomas Deweese		Date of Receipt
Mailing Address 500 Interstate Boulevard So	uth	03 31 2013
City	State Zip Code	Transaction ID : PR329215727794
Nashville	TN 37210-4634	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	76.94
Name of Employer	Occupation	-
American Hospital Association-Chicago	AHA Regional Executive	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  230.82	P/R Deduction (\$38.47 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)	·····	230.82

President & Chief Operating Officer, C

230.82

Aggregate Year-to-Date ▼

TOTAL This Period (last page this line number only).....

P/R Deduction (\$38.47 Bi-Weekly)

FOR LINE NUMBER: PAGE 62 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

96

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Thomas Misfeldt Date of Receipt Mailing Address One North Franklin 2013 31 City State Zip Code Transaction ID: PR330411627794 Chicago IL 60606-3436 Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Name of Employer Occupation American Hospital Association-Chicago Associate Regional Executive Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Paul N. Muraca Date of Receipt Mailing Address 4960 138th Circle West 03 31 2013 City State Zip Code Transaction ID: PR330475427794 MN Apple Valley 55124-9229 Amount of Each Receipt this Period FEC ID number of contributing 76.94 federal political committee. Name of Employer Occupation American Hospital Association-Chicago Regional Executive Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Eileen O'Keefe Date of Receipt Mailing Address 172 Atteridge 31 2013 City Zip Code State Transaction ID: PR330549227794 IL Lake Forest 60045-1715 Amount of Each Receipt this Period FEC ID number of contributing 76.94 С federal political committee. Name of Employer Occupation American Hospital Association-Chicago Vice President, Constituency Section Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$38.47 Bi-Weekly) 230.82 Other (specify) 230.82 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

	FOR LINE NUMBE	:R:	PAGE 63 OF				
Use separate schedule(s)	(check only one)						
for each category of the Detailed Summary Page	X 11a 11b	1	11c	12			
	13 14		15	16			

96

	Statements may not be sold or used by any pers e name and address of any political committee to			
NAME OF COMMITTEE (In Full)				
American Hospital Association	PAC			
Full Name (Last, First, Middle Initial)  Ms. Darlene S. Vanderbush		Date of Receipt		
Mailing Address 26 West Glendale Ave.		03 31 2013		
City	State Zip Code	Transaction ID : PR331304227794		
Alexandria	VA 22301-2402	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	76.94		
Name of Employer	Occupation			
American Hospital Association-Washingt	Director Advocacy and Public Policy Op			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  230.82	P/R Deduction (\$38.47 Bi-Weekly)		
Full Name (Last, First, Middle Initial)  Ms. Elizabeth Summy		Date of Receipt		
Mailing Address One North Franklin		M = M / D = D / Y = Y = Y		
City	State Zip Code	03 31 2013		
Chicago	IL 60606-3436	Transaction ID : PR346168127794  Amount of Each Receipt this Period		
		Amount of Each Necelpt this Period		
FEC ID number of contributing federal political committee.	C	76.94		
Name of Employer	Occupation			
American Hospital Association-Chicago	Vice President, PMG			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  230.82	P/R Deduction (\$38.47 Bi-Weekly)		
Full Name (Last, First, Middle Initial)  C. Ms. Megan Cundari		Date of Receipt		
Mailing Address 325 Seventh Street, NW Suite 700		03 31 2013		
City	State Zip Code	Transaction ID : PR518031927794		
Washington	DC 20004-2818	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	76.94		
Name of Employer	Name of Employer Occupation			
American Hospital Association-Washingt	Senior Associate Director			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	230.82	P/R Deduction (\$38.47 Bi-Weekly)		
SUBTOTAL of Receipts This Page (optional)		230.82		
TOTAL This Period (last page this line number	r only)			

Use separate schedule(s) for each category of the Detailed Summary Page

ı	FOR LINE	PAGE	E 64 OF	96				
	(check only one)							
	X 11a	11b	11c	12				
	13	14	15	16	17			

	the name and address of any political committee t	
NAME OF COMMITTEE (In Full)		
American Hospital Association	on PAC	
Full Name (Last, First, Middle Initial)  A. Ms. Ashley B. Thompson		Date of Receipt
Mailing Address 606 S. Royal St.		03 31 2013
City	State Zip Code	Transaction ID : PR766023727794
Alexandria	VA 22314-4142	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	76.94
Name of Employer	Occupation	1
American Hospital Association-Washingt	Director, Policy	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		P/R Deduction (\$38.47)
Other (specify) ▼	230.82	, , , , , , , , , , , , , , , , , , ,
Full Name (Last, First, Middle Initial)  3.		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contribution		Amount of Eduli Hoodipt this Fellou
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	.ggga. 0 10a 10 Dato ₹	
Other (specify) ▼		
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Passint this Bariet
FEC ID number of contributing	C	Amount of Each Receipt this Period
federal political committee.  Name of Employer	Occupation	
, ,	Оссиранон	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼		
SUBTOTAL of Receipts This Page (optional)	)	76.94
,		
TOTAL This Period (last page this line numb	ber only)	83496.21

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 OF 96 (check only one)  11a 11b 11c X 12 13 14 15 16 17
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association	n PAC		
Full Name (Last, First, Middle Initial)  New York Hospital & Healthcare As  Mailing Address One Empire Drive	ssoc. FED PA	С	Date of Receipt  03 05 2013
City Rensselaer	State NY	Zip Code 12144	Transaction ID : 20769971  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C co	0160259	20000.00
Name of Employer	Occupation	1	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 120000.00	
Full Name (Last, First, Middle Initial)  California Healthcare Association	PAC - Fede	ral	Date of Receipt
Mailing Address 1215 K Street Suite 800 City Sacramento	State CA	Zip Code 95814	03 07 2013  Transaction ID : 20770392  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C coo	0237495	40000.00
Name of Employer	Occupation		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 40000.00	]
Full Name (Last, First, Middle Initial)  Hospital and Healthsystem Assoc. of F	A - Federal Po	litical Action Comm (HAPAC)	Date of Receipt
Mailing Address Post Office Box 8600	Ctata	7:- 0-1-	03 21 2013
City Harrisburg	State PA	Zip Code 17105-8600	Transaction ID : 20791951  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C co	0128082	20000.00
Name of Employer	Occupation	1	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 72500.00	
SUBTOTAL of Receipts This Page (optional)			80000.00

TOTAL This Period (last page this line number only).....

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 OF 96 (check only one)  11a 11b 11c X 12 13 14 15 16 17		
	for commercial purposes, other than using the			erson for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) American Hospital Association I	PAC				
Α.	Full Name (Last, First, Middle Initial) California Healthcare Association PAC	Date of Receipt				
	Mailing Address 1215 K Street Suite 800	03 19 2013				
	City	State	Zip Code	Transaction ID : 20791954		
	Sacramento	CA	95814	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C co	0237495	70000.00		
	Name of Employer	Occupation	1			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General Other (specify) ▼		110000.00			
— В.	Full Name (Last, First, Middle Initial)			Date of Receipt		
	Mailing Address	M = M / D = D / Y = Y = Y				
	City	State	Zip Code	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.					
	Name of Employer	Occupation	١			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼			
<u> </u>	Full Name (Last, First, Middle Initial)			Date of Receipt		
Ο.	Mailing Address			M = M / D = D / Y = Y = Y		
	City	State	Zip Code	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С				
	Name of Employer	Occupation	ı			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼			
s	UBTOTAL of Receipts This Page (optional)			70000.00		

TOTAL This Period (last page this line number only).....

. .

150000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s)			FOR LINE NUMBER: PAGE 67 OF 96					
		for each category of the		(check only one)						
		Detailed Summary Page		13	14	,	15	16	<b>X</b> 17	
	ly information copied from such Reports and State for commercial purposes, other than using the									utions
	NAME OF COMMITTEE (In Full) American Hospital Association P	PAC								
<b>A</b> .	Full Name (Last, First, Middle Initial) TD Bank				Date o	f Receip	nt			
Α.	Mailing Address 901 Seventh Street, NW					M = M / D = D / Y = Y = Y				
	City State Zip Code				03 29 2013 Transaction ID : 20828513					
	Washington	DC 20001			Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С			193.02					
	Name of Employer	Occupation								
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 537.71		Interest Earned					
— В.	Full Name (Last, First, Middle Initial)				Date of	f Receip	ot.			
٥.	Mailing Address				M = M / D = D / Y = Y = Y					
	City	State	Zip Code		Amount of Each Receipt this Period				d	
	FEC ID number of contributing federal political committee.	С								
	Name of Employer	Occupation			_					
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼							
<u> </u>	Full Name (Last, First, Middle Initial)				Date o	f Recei	nt.			
Ο.	Mailing Address				M = M			) / Y	Y	Y
	City	State	Zip Code		Amount of Each Receipt this Period					d
	FEC ID number of contributing federal political committee.	С			Amount of Each Floodipt this Fe					
	Name of Employer	Occupation			-					
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼							
s	UBTOTAL of Receipts This Page (optional)						7		19:	3.02

TOTAL This Period (last page this line number only).....

193.02

## S П

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 68 OF 96				
·			Use separate schedule(s)	(check only one)				
ш	EMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c 12				
			Detailed Summary Fage	13 14 15 X 16 17				
	ly information copied from such Reports and State for commercial purposes, other than using the							
$\setminus$	NAME OF COMMITTEE (In Full)							
	American Hospital Association P	PAC						
Α.	Full Name (Last, First, Middle Initial) Swalwell For Congress			Date of Receipt				
	Mailing Address P.O. Box 2847			03 12 2013				
	City	State	Zip Code	Transaction ID: 20801353				
	Dublin	CA	94568	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C cod	0502294	1000.00				
	Name of Employer	Occupation						
	Receipt For: 2012 Primary General	Aggregate	Year-to-Date ▼					
	Other (specify) ▼ 2012 General Debt Re		1000.00	Refund of 12/12 Check				
— В.	Full Name (Last, First, Middle Initial)			Date of Receipt				
	Mailing Address			M = M / D = D / Y = Y = Y				
	City	State	Zip Code	Amount of Each Receipt this Period				
	FEC ID number of contributing			7 thouse of Each Floodipt the Folia				
	federal political committee.	C		7 7 7				
	Name of Employer	Occupation						
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General	33 13						
	Other (specify) ▼		<b>A A A</b>					
<u>с</u> .	Full Name (Last, First, Middle Initial)			Date of Receipt				
	Mailing Address			M - M / D - D / Y - Y - Y				
	City	State	Zip Code	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		Autount of Each Flooring time Fortice				
	Name of Employer	Occupation						
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General	33 -3-10						
	Other (specify) ▼							
	SUBTOTAL of Receipts This Page (optional)			1000.00				
L	TOTAL OF TIECEIPES THIS Fage (Optional)		<b>_</b>					

TOTAL This Period (last page this line number only).....

1000.00

SCHEDULE B (FEC Form 3X)	Has assessed at 1.1.4.2	FOR LINE NUMBER: PAGE 69 OF 96					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)				
	Detailed Summary Page	X 21b 27	22 23 24 25 28a 28b 28c 29				
Any information copied from such Reports and Sta	tements may not be sold or use						
or for commercial purposes, other than using the n							
NAME OF COMMITTEE (In Full)							
American Hospital Association P.	AC						
Full Name (Last, First, Middle Initial)							
A. Newtek Merchant Solutions	Date of Disbursement						
Mailing Address 744 N 4th Street			03 04 2013				
City	State Zip Code		Transaction ID: 20828510				
Milwaukee	WI 53203		Transaction ID: 20828510				
Purpose of Disbursement Merchant Fees		001	Amount of Each Disbursement this Period				
Candidate Name		Category/	290.22				
Office Sought: House Disburg	sement For:	Туре	130.22				
Senate	Primary General		Merchant Fees				
State: District:	Other (specify) ▼						
Full Name (Last, First, Middle Initial)							
B. Paymentech			Date of Disbursement				
Mailing Address 14221 Dallas Parkway Building Two	03 05 2013						
City Dallas	State Zip Code TX 75254		Transaction ID : 20828511				
Purpose of Disbursement Merchant Fees		001	Amount of Each Disbursement this Period				
Candidate Name		Category/ Type	47.73				
Office Sought:  Senate  President  State:  Disburs  Senate	sement For: Primary General Other (specify) ▼		Merchant Fees				
Full Name (Last, First, Middle Initial)							
C. U.S. Treasury			Date of Disbursement				
Mailing Address P.O. Box 2188	03 13 2013						
City Parkersburg	State Zip Code WV 26106-2188		Transaction ID : 20828512				
Purpose of Disbursement							
Federal Taxes 001			Amount of Each Disbursement this Period				
Candidate Name		Category/ Type	1050.00				
	sement For:						
Senate	Primary General		Federal Taxes				
President   State: District:	Other (specify) ▼						
Giaic. District.							
SUBTOTAL of Disbursements This Page (optional	)	······ <u>▶</u>	1387.95				
TOTAL This Period (last page this line number or	ly)		1387.95				

	CHEDULE B (FEC Form 3X)	Use separate schedule(s	FOR LINE					
IT	EMIZED DISBURSEMENTS	for each category of the	(check only	<sup>7</sup> one)				
		Detailed Summary Page	27	28a 28b 28c 29 30b				
	ny information copied from such Reports and Statem for commercial purposes, other than using the nam							
\	NAME OF COMMITTEE (In Full)	c and address of any point	car committee to	Joint Communicia non Such Commune.				
$\Big >$	American Hospital Association PAC							
^	Full Name (Last, First, Middle Initial)	•		Data of Dishumannant				
Α.	Democratic Congressional Campai	gn Committee		Date of Disbursement				
	Mailing Address 430 South Capitol Street			03 01 2013				
	City	state Zip Code		Transaction ID : 20772450				
		DC 20003		Transaction ID : 20773459				
	Purpose of Disbursement 2013 Contribution		011	Amount of Each Disbursement this Period				
	Candidate Name		Category/					
	Democratic Congressional Campaig	gn Committee	Type	15000.00				
	President	nent For: Primary General Other (specify)		2013 Contribution				
	State: District: Full Name (Last, First, Middle Initial)							
В.	Castor For Congress			Date of Disbursement				
	Mailing Address 301 W Platt Street, #385			03 01 7 2013				
	City	State Zip Code						
	Tampa	FL 33606		Transaction ID: 20773460				
	Purpose of Disbursement Contribution		244	Assessment of Freely District consent this Deviced				
	Candidate Name		011	Amount of Each Disbursement this Period				
	Rep. Katherine Castor		Category/ Type	2500.00				
	Office Sought: House Senate Disbursem	nent For: 2014 Primary General Other (specify)	,,	Contribution				
	Full Name (Last, First, Middle Initial)							
C.	Connolly For Congress			Date of Disbursement				
	Mailing Address 3706 Prado Place			03 01 2013				
	City	state Zip Code		Transaction ID : 20773461				
		VA 22031		Transaction ib . 20113401				
	Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period				
	Candidate Name		Category/					
	Rep. Gerald E. Connolly		Type	1000.00				
	Senate	nent For: 2014  Primary General  Other (specify)		Contribution				
	State: VA District: 11							
S	SUBTOTAL of Disbursements This Page (optional)		·····	18500.00				

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I		_			
TEMIZED DISBURSEMENTS	for each category of the	(check only 21b	one) 22 🔀 23 🗆 24 🗆 25 🗀 26	3			
	Detailed Summary Page	27	28a 28b 28c 29 30	)b			
Any information copied from such Reports and Stater or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)	le and address of any pointe	ai committee to	Solicit contributions from Such committee.	_			
American Hospital Association PAG	?						
·							
Full Name (Last, First, Middle Initial)			Date of Disbursement				
A. Doggett For US Congress			M M / D D / Y Y Y				
Mailing Address PO Box 5843			03 01 2013				
City	State Zip Code		Transaction ID : 20772464	_			
Austin	TX 78763		Transaction ID: 20773464				
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period				
Candidate Name		Category/		i			
Rep. Lloyd Doggett		Type	2000.00				
	ment For: 2014						
Senate   X	Primary General Other (specify) ▼		Contribution				
State: TX District: 35	Other (specify)						
Full Name (Last, First, Middle Initial)				_			
B. Chris Gibson For Congress			Date of Disbursement				
Mailing Address PO Box 234			03 01 2013				
Walling Address PO Box 234			03 01 2013	]			
•	State Zip Code NY 12866		Transaction ID: 20773467				
Saratoga Springs Purpose of Disbursement	12000						
Contribution		011	Amount of Each Disbursement this Period				
Candidate Name		Category/	2000.00				
Rep. Chris Gibson  Office Sought:   V   House   Disburser	ment For: 2014	Туре	200.00				
	Primary General		Contribution				
President	Other (specify) ▼		Contribution				
State: NY District: 19							
Full Name (Last, First, Middle Initial)			Date of Disbursement				
C. Trey Gowdy For Congress			M M / D D / Y Y Y Y				
Mailing Address PO Box 3324			03 01 2013				
City	State Zip Code						
Spartanburg	SC 29304		Transaction ID: 20773468				
Purpose of Disbursement Contribution		044					
Candidate Name		011	Amount of Each Disbursement this Period				
Rep. Trey Gowdy		Category/ Type	1000.00				
Office Sought: House Disburser	ment For: 2014						
Senate President	Other (specify) —		Contribution				
State: SC District: 04	Other (specify) ▼						
•				Ī			
SUBTOTAL of Disbursements This Page (optional)		·····	5000.00				
TOTAL This Period (last page this line number only)							

SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE 72 OF 96
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	
	for each category of the Detailed Summary Page	21b	22 🗙 23 🔲 24 🔲 25 🖂 26
	, ,	27	28a 28b 28c 29 30l
Any information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
American Hospital Association PAC			
Full Name (Last, First, Middle Initial)			
A. Friends Of Jack Kingston			Date of Disbursement
Mailing Address PO Box 2133			03 01 2013
City	State Zip Code		Transaction ID : 20773470
Savannah	GA 31402		Transaction ID: 20773470
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. Jack Kingston		Туре	1000.00
Senate President	nent For: 2014  Primary General  Other (specify)		Contribution
State: GA District: 01			
Full Name (Last, First, Middle Initial)			Data of Dishamourant
B. Committee To Elect Linda Sanchez	<u>7</u>		Date of Disbursement
Mailing Address 601 S Glenoaks Blvd Suite 211			03 01 2013
City S Burbank	State Zip Code CA 91502		Transaction ID : 20773471
Purpose of Disbursement	31302		
Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	4000.00
Rep. Linda T. Sanchez		Type	1000.00
Senate	nent For: 2014  Primary General  Other (specify)		Contribution
Full Name (Last, First, Middle Initial)			
C. Yoder For Congress, Inc			Date of Disbursement
Mailing Address PO Box 26742			03 01 7 2013
City	State Zip Code		Tanana (1 and 10 and 17 4 7 4
	KS 66225		Transaction ID: 20773474
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name			Amount of Each dispursement this Penou
Rep. Kevin Yoder		Category/ Type	1000.00
Office Sought:    House   Disbursem	nent For: 2014  Primary General  Other (specify)		Contribution
State: KS District: 03			
SUBTOTAL of Disbursements This Page (optional)		······	3000.00
TOTAL This Period (last page this line number only)		·····•	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
TEMIZED DISBURSEMENTS	for each category of the	(check only	one) 22 🗙 23 24 25 26
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full)	ne and address of any pointer		Solicit contributions from Such committee.
American Hospital Association PA	C		
Full Name (Last, First, Middle Initial)			
A. Mark Pryor For U.S. Senate			Date of Disbursement
Mailing Address PO Box 2720			03 01 2013
,	State Zip Code		Transaction ID : 20773477
Little Rock	AR 72203		
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	4000.00
Sen. Mark L. Pryor		Туре	1000.00
Office Sought:  House  Senate  President  Disburser	ment For: 2014 Primary General Other (specify) ▼		Contribution
State: AR District:			
Full Name (Last, First, Middle Initial)			Date of Disbursement
B. Kansans For Huelskamp			M M / D D / Y Y Y Y
Mailing Address PO Box 410			03 01 2013
Fowler	State Zip Code KS 67844		Transaction ID: 20773492
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	7 11.00
Rep. Tim Huelskamp		Type	1000.00
	nent For: 2014 Primary General Other (specify)		Contribution
Full Name (Last, First, Middle Initial)			
C. Collins For Congress			Date of Disbursement
Mailing Address PO Box 386			03 01 2013
City	State Zip Code		Transaction ID : 20773495
Clarence	NY 14031		Transaction ib . 2011 3433
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Mr. Christopher Collins		Туре	500.00
Office Sought:    House   Disburser	ment For: 2014 Primary General Other (specify) ▼		Contribution
State: NY District: 27			
SUBTOTAL of Disbursements This Page (optional)		······•	2500.00
TOTAL This Period (last page this line number only			

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 74 OF 96
TEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	
	for each category of the Detailed Summary Page	21b	22 🔀 23 🔲 24 📗 25 📗 26
		27	28a 28b 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full)			
American Hospital Association PA	С		
Full Name (Last, First, Middle Initial)			
A. Texans For Senator John Cornyn	Inc		Date of Disbursement
Mailing Address PO Box 13026			03 01 2013
City	State Zip Code		Transaction ID : 20773512
Austin	TX 78711		11alisaction ID . 20113312
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Sen. John Cornyn		Type	1000.00
Office Sought:  House  Senate  President  Disburse	ment For: 2014 Primary General Other (specify)		Contribution
State: TX District:			
Full Name (Last, First, Middle Initial)			
B. Bill Shuster For Congress			Date of Disbursement
Mailing Address PO Box 27			03 04 2013
City Hollidaysburg	State Zip Code PA 16648		Transaction ID: 20773513
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	4500.00
Rep. William Franklin Shuster		Type	1500.00
	ment For: 2014 Primary ☐ General Other (specify) ▼		Contribution
Full Name (Last, First, Middle Initial)			
C. Mark Pryor For U.S. Senate			Date of Disbursement
Mailing Address PO Box 2720			03 12 2013
City Little Rock	State Zip Code AR 72203		Transaction ID: 20776977
Purpose of Disbursement Contribution	72203		
Candidate Name		011	Amount of Each Disbursement this Period
Sen. Mark L. Pryor		Category/ Type	1000.00
	ment For: 2014	Туре	
Senate President State: AR District:	Primary General Other (specify) ▼		Contribution
SUBTOTAL of Disbursements This Page (optional).		·····•	3500.00
TOTAL This Period (last page this line number only	)	·····•	

SCHEDULE B (FEC Form	•	Use sen	arate schedule(s)				IUMBER:	:		PAG	E 75	OF 9	96
ITEMIZED DISBURSEMEN	ITS	for each	category of the		Cneck	c only 21b	one) 22	<b>X</b> 23	, [	24	25	<u> </u>	26
		Detailed	Summary Page			27	28a	28	ib	28c	29	3	30b
Any information copied from such Report for commercial purposes, other than													
NAME OF COMMITTEE (In Full)													
American Hospital Assoc													
Full Name (Last, First, Middle Initial	)						Data a	f Diah					
A. Tim Scott For Senate							Date o	f Disbu	rsem		I Y I Y	Y	
Mailing Address 1405 Ashley River F	Road						03		12	4 L	2013		
City	5	State	Zip Code				Trans	action	ID ·	2077697	8		
Charleston		SC	29407				IIalis	action	ים . א	2011031	U		
Purpose of Disbursement Contribution				Г	011		Amoun	t of Ea	ch Di	isbursem	ent this	Period	
Candidate Name				Ca	tegor	v/			_		40/	20.00	1
Sen. Tim Scott					Туре			7	_	- 7	100	00.00	_
Office Sought:  House Senate President	X	nent For: Primary Other (spe	General				Contrib	ution					
State: SC District:													
Full Name (Last, First, Middle Initial	)						<b>5</b> .						
B. Becerra For Congress							Date o	f Disbu	rsem		YYY	V	
Mailing Address P.O. Box 261060							03	]	15	]	2013		
City Los Angeles	S	State CA	Zip Code 90026				Trans	saction	ID:	2077698	4		
Purpose of Disbursement Contribution					011		Amoun	t of Fa	ch D	isbursem	ant this	Pariod	
Candidate Name				ш			Amoun	t Of La	וט ווג	isbui seii		i enou	4
Rep. Xavier Becerra					tegor Type	y/				- 7	200	00.00	
Office Sought: House Senate President	X	nent For: Primary Other (spe	General		71		Contrib	ution		,			
State: CA District: 34  Full Name (Last, First, Middle Initial	\					-			—				_
C. Jo Bonner For Congress		е						f Disbu					
Mailing Address P.O.Box 851232							03		12	/ Y	2013	- Y	
City	5	State	Zip Code				Trans		ın.	2077600			
Mobile		AL	36685				Trans	saction	: טו	2077698	5		
Purpose of Disbursement Contribution					011		Amoun	t of Fa	ch D	isbursem	ent this	Period	
Candidate Name				Ca	tegor	v/	7 tillouri	t or Ea	JII D.	iobarocii			-
Rep. Josiah Robins Bon					Туре			- 1			100	00.00	
Office Sought: House Senate President	$\times$	nent For: Primary Other (spe	General				Contrib	ution					
State: AL District: 01													
SUBTOTAL of Disbursements This Pa	age (optional)					<b>•</b>		-,		,	400	00.00	]
TOTAL This Period (last page this line	e number only)					_							1

SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE 76 OF 96
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	21b	22 X 23 24 25 26
		27	28a 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
American Hospital Association PAC			
Full Name (Last, First, Middle Initial)			
A. Butterfield For Congress			Date of Disbursement
Mailing Address PO Box 2571			03 12 2013
City	State Zip Code		Transaction ID - 2077C004
	NC 27894		Transaction ID: 20776991
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	4000.00
Rep. George K. Butterfield		Type	1000.00
Senate President	nent For: 2014  Primary General  Other (specify)		Contribution
State: NC District: 01			
Full Name (Last, First, Middle Initial)  B. Friends Of Lois Capps			Date of Disbursement
			03 12 2013
Mailing Address P.O. Box 23940			03 12 2013
,	State Zip Code CA 93121		Transaction ID: 20776992
Purpose of Disbursement Contribution			
Candidate Name		011	Amount of Each Disbursement this Period
Rep. Lois Capps		Category/ Type	2000.00
	nent For: 2014	Турс	
	Primary General		Contribution
President	Other (specify) ▼		
State: CA District: 24			
Full Name (Last, First, Middle Initial)			Data of Distance and
C. Capuano For Congress Committee			Date of Disbursement
Mailing Address PO Box 440305			03 / 12 / 2013
City	State Zip Code		Transaction ID : 20776993
Somerville Purpose of Disbursement	MA 02144		
Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. Michael E. Capuano		Туре	1000.00
Senate	nent For: 2014  Primary General  Other (specify)		Contribution
States MIA Station 07			
SUBTOTAL of Disbursements This Page (optional)		·····•	4000.00
TOTAL This Period (last page this line number only).			

SCHEDULE B (FEC Form 3X)	Hoo occupate asked to	FOR LINE		PAGE 77 OF 96
ITEMIZED DISBURSEMENTS	Use separate schedule for each category of the	(oricon oriny		
	Detailed Summary Page		22 X 23 28b	24 25 20 28c 29 3
Any information copied from such Reports and State				
or for commercial purposes, other than using the na	ame and address of any po	litical committee to	solicit contributions fro	om such committee.
NAME OF COMMITTEE (In Full)				
American Hospital Association PA	AC .			
Full Name (Last, First, Middle Initial)			_	
A. Mike Kelly For Congress			Date of Disburseme	
Mailing Address PO Box 476			03 / 12	2013
City	State Zip Code		Transaction ID : 2	20776999
Lyndora  Rurposo of Disbursoment	PA 16045		Hansacuuli ID : 2	.0110333
Purpose of Disbursement Contribution		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		1000.00
Rep. Mike Kelly		Type	7	1000.00
	ement For: 2014 Primary General Other (specify) ▼	ı	Contribution	
State: PA District: 03	· ·			
Full Name (Last, First, Middle Initial)				
B. People For Derek Kilmer			Date of Disburseme	ent
Mailing Address PO Box 1574			03 12	2013
City Gig Harbor	State Zip Code WA 98335		Transaction ID : 2	20777000
Purpose of Disbursement				
Contribution		011	Amount of Each Dis	sbursement this Period
Candidate Name Mr. Derek Kilmer		Category/		1000.00
	ement For: 2014	Type		
Senate President	Primary General Other (specify) ▼	l	Contribution	
State: WA District: 06  Full Name (Last, First, Middle Initial)				
C. Kind For Congress Committee			Date of Disburseme	_
Mailing Address 205 5th Avenue South			03 / 12	2013
City	State Zip Code WI 54601		Transaction ID: 2	20777001
La Crosse Purpose of Disbursement	VVI 340U I	T		
Contribution		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		500.00
Rep. Ron Kind  Office Sought: House Disburse	ement For: 2014	Type		
Senate President	Primary General Other (specify) ▼	ı	Contribution	
State: WI District: 03				
SUBTOTAL of Disbursements This Page (optional)		·····		2500.00
		<u> </u>		
TOTAL This Period (last page this line number only	y)y		1 1 40 1	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE N	
TEMIZED DISBURSEMENTS	for each category of the	(check only 21b	one) 22 🗙 23 24 25 26
	Detailed Summary Page	27	28a 28b 28c 29 30k
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)	to and address of any pointed		Solici Contributions from Such Committee.
American Hospital Association PAC			
Full Name (Last, First, Middle Initial)			Date of Bishows and
A. Latta For Congress			Date of Disbursement
Mailing Address PO Box 106			03 12 2013
City	State Zip Code		Transaction ID : 20777002
Bowling Green	OH 43402		Transaction ID: 20777002
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name	I		
Rep. Robert Latta		Category/ Type	1000.00
Senate	nent For: 2014  Primary General  Other (specify)		Contribution
State: OH District: 05			
Full Name (Last, First, Middle Initial)			5
B. Alan Lowenthal For Congress			Date of Disbursement
Mailing Address 6380 Wilshire Blvd., #1612			03 12 2013
City S Los Angeles	State Zip Code CA 90048		Transaction ID : 20777003
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name			Amount of Each Dispursement this Period
Mr. Alan Lowenthal		Category/ Type	2000.00
Senate	nent For: 2014 Primary General Other (specify)	,,	Contribution
Full Name (Last, First, Middle Initial)			
C. Nita Lowey For Congress			Date of Disbursement
Mailing Address PO Box 271			03 12 2013
City	State Zip Code		Transaction ID : 20777004
	NY 10605		Transaction ib . 20777004
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Rep. Nita M. Lowey		Туре	2000.00
Senate	nent For: 2014  Primary General  Other (specify)		Contribution
State: NY District: 17	· · · · · · · · · · · · · · · · · · ·		
SUBTOTAL of Disbursements This Page (optional)			5000.00
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 79 OF 96
TEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	
	for each category of the Detailed Summary Page	21b	22 🔀 23 🔲 24 📗 25 📗 26
	, ,	27	28a 28b 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)			
American Hospital Association PA	С		
Full Name (Last, First, Middle Initial)			
A. People For Ben			Date of Disbursement
Mailing Address PO Box 31129			03 12 2013
City	State Zip Code		Transaction ID : 20777005
Santa Fe	NM 87594		Transaction ID . 20777005
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. Ben Ray Lujan Jr.		Туре	1000.00
Office Sought: House Disburse Senate President	ment For: 2014 Primary General Other (specify) ▼		Contribution
State: NM District: 03			
Full Name (Last, First, Middle Initial)			D (B)
B. Buck McKeon For Congress			Date of Disbursement
Mailing Address 23942 Lyons Ave #105			03 12 2013
City Santa Clarita	State Zip Code CA 91321		Transaction ID: 20777006
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. Howard P. McKeon		Type	1000.00
	ment For: 2014 Primary General Other (specify)		Contribution
Full Name (Last, First, Middle Initial)			
C. McNerney For Congress			Date of Disbursement
Mailing Address P.O. Box 690371			03 12 2013
City Stockton	State Zip Code CA 95269		Transaction ID: 20777007
Purpose of Disbursement Contribution	33203	011	
Candidate Name		011	Amount of Each Disbursement this Period
Rep. Jerry McNerney		Category/ Type	1000.00
	ment For: 2014	.,,,,,,	
Senate President State: CA District: 09	Primary General Other (specify) ▼		Contribution
5.1			
SUBTOTAL of Disbursements This Page (optional).		·····•	3000.00
TOTAL This Period (last page this line number only	)	·····•	

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 80 OF 96
TEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(orleast orlin)	•
	Detailed Summary Page	21b	22 X 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , ,		
American Hospital Association	PAC		
/ American mospital / tosociation	1710		
Full Name (Last, First, Middle Initial)			
<sup>A.</sup> Citizens For Rush			Date of Disbursement
Mailing Address D. O. Bay 7000			03 12 2013
Mailing Address P. O. Box 7292			03 12 2013
City	State Zip Code		
Chicago	IL 60680		Transaction ID: 20777008
Purpose of Disbursement Contribution			
		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2000.00
Rep. Bobby Lee Rush  Office Sought:  House Disb	ursement For: 2014	Туре	7
Senate	Primary General		Contribution
President	Other (specify)		Contribution
State: IL District: 01			
Full Name (Last, First, Middle Initial)			
B. Democrats Win Seats PAC			Date of Disbursement
			M = M / D = D / Y = Y = Y
Mailing Address 1071 Turin Branch Lane			03 12 2013
City	State Zip Code		
Weston	FL 33326		Transaction ID: 20777009
Purpose of Disbursement			
2013 Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Democrats Win Seats PAC		Туре	2500.00
	ursement For:		
Senate President	Primary General Other (specify) ▼		2013 Contribution
State: District:	Other (specify)		
Full Name (Last, First, Middle Initial)			
C. Follow the North Star Fund			Date of Disbursement
			M - M / D - D / Y - Y - Y
Mailing Address 316 E Hennepin Ave			03 12 2013
Suite 201	7: 0 1		
City Minneapolis	State Zip Code MN 55414		Transaction ID: 20777010
Purpose of Disbursement	WII 33414		
2013 Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Follow the North Star Fund		Type	1000.00
	ursement For:		
Senate	Primary General		2013 Contribution
State: District:	Other (specify)		
otate. District.			
SUBTOTAL of Disbursements This Page (option	nal)		5500.00
COLUMN TIME TO A STOCK TO THE TOTAL CONTROL TO THE	,		
	only)		

SCHEDULE B (FEC Form 3X		FOR LINE I	NUMBER: PAGE 81 OF	96
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	1.00
	Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29	26 30b
Any information copied from such Reports and	d Statements may not be sold or use			
or for commercial purposes, other than using				_
NAME OF COMMITTEE (In Full)				
American Hospital Associatio	n PAC			
Full Name (Last, First, Middle Initial)				
A. Fund For The Majority, The			Date of Disbursement	
Mailing Address 1212 S. Victory Blvd.			03 12 2013	
City	State Zip Code		Transaction ID : 20777011	
Burbank	CA 91502		Transaction ID . 20777011	
Purpose of Disbursement 2013 Contribution		011	Amount of Each Disbursement this Period	od
Candidate Name		Category/	2000.00	
Fund For The Majority, The  Office Sought: House D	ichurcoment For	Туре	2000.00	_
State: District:	isbursement For:  Primary General  Other (specify) ▼		2013 Contribution	
Full Name (Last, First, Middle Initial)  B. Promoting our Republican Te	eam PAC		Date of Disbursement	
Mailing Address 8331 Little Harbor Drive			03 12 2013	
City Cincinnati	State Zip Code OH 45244		Transaction ID: 20777012	
Purpose of Disbursement 2013 Contribution		011	Amount of Each Disbursement this Perio	od
Candidate Name	D.1.0	Category/	2500.00	$\neg$
Promoting our Republican Te	I I	Type	2500.00	_
Office Sought:    House   D	isbursement For:  Primary General  Other (specify) ▼		2013 Contribution	
Full Name (Last, First, Middle Initial)  C. Robin Kelly For Congress			Date of Disbursement	
Mailing Address PO Box 6953			03 12 2013	
City	State Zip Code		Transaction ID: 20777013	
Chicago Purpose of Disbursement Contribution	IL 60680	011		
Candidate Name		011	Amount of Each Disbursement this Perio	)d
Rep. Robin Kelly		Category/ Type	1000.00	
Office Sought: House Senate President	isbursement For: 2013  Primary General  Other (specify) ▼		Contribution	
State: IL District: 02	2013 Special Gene	eral		
SUBTOTAL of Disbursements This Page (op			5500.00	7
TOTAL This Period (last page this line numb	per only)			

SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE 82 OF 96
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	21b	22 🗙 23 24 25 26
		27	28a 28b 28c 29 30b
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
American Hospital Association PAG			
Full Name (Last, First, Middle Initial)			
A. Andre Carson For Congress			Date of Disbursement
Mailing Address P.O. Box 1863			03 12 2013
,	State Zip Code		Transaction ID : 20777055
Indianapolis	IN 46206		Transaction ID . 20111033
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. Andre Carson		Туре	1000.00
Senate President	nent For: 2014  Primary General  Other (specify)		Contribution
State: IN District: 07			
Full Name (Last, First, Middle Initial)			D (B: L
B. Lynn Jenkins For Congress			Date of Disbursement
Mailing Address PO Box 1441			03 12 2013
City S	State Zip Code KS 66601		Transaction ID : 20777061
Purpose of Disbursement	00001		
Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. Lynn Jenkins  Office Sought:   V   House   Disbursen	and Fam. 2011	Туре	1000.00
	nent For: 2014  Primary General  Other (specify)		Contribution
Full Name (Last, First, Middle Initial)			
C. Steve Israel For Congress Commit	tee		Date of Disbursement
Mailing Address P.O. Box 1400			03 12 2013
City S Melville	State Zip Code NY 11747		Transaction ID: 20777067
Purpose of Disbursement Contribution		011	
Candidate Name			Amount of Each Disbursement this Period
Rep. Steve J. Israel		Category/ Type	2000.00
Senate President	nent For: 2014 Primary General Other (specify)		Contribution
State: NY District: 03			
SUBTOTAL of Disbursements This Page (optional)		······ <u>▶</u>	4000.00
TOTAL This Period (last page this line number only)		······	

S	CHEDULE B (FEC Form 3X)			FOR LIN	IE NUMBER	:	PAGE	83 (	)F 96
IT	EMIZED DISBURSEMENTS		parate schedule(s) category of the	(check o	nly one)			7	
			Summary Page	21		X 23	24	25 29	26
_		<u> </u>		27		28b	28c		30b
	ny information copied from such Reports and Statem for commercial purposes, other than using the nam								
K,	NAME OF COMMITTEE (In Full)		and or any point				5 64611 (		
$ \rangle$	American Hospital Association PAC								
V	A Thomas Troopical Acoociation I Ac								
_	Full Name (Last, First, Middle Initial)								
Α.	Crowley For Congress				Date o	f Disburser	ment		
	Mailing Address 84 FC Creed Avenue				MM			Y   Y	Y
	Mailing Address 84-56 Grand Avenue				03	12	نسا ا	2013	
	City	State	Zip Code		_		007777		
	Elmhurst	NY	11373		Trans	saction ID :	20777068		
	Purpose of Disbursement Contribution			211	Π.		<b>.</b>		
				011	Amoun	t of Each [	Disburseme	nt this F	eriod
	Candidate Name  Rep. Joseph Crowley			Category/				2500	.00
	Rep. Joseph Crowley  Office Sought:  House Disbursen	nent For	2014	Type		,	7		
		Primary	General		Contrib	ution			
		Other (spe			Contino	adon			
	State: NY District: 14								
	Full Name (Last, First, Middle Initial)								
В.	Bonamici For Congress				Date o	f Disburser	ment		
	Mailian Adduses and Survey				M = M	/ D I		Y   Y	Υ
	Mailing Address 2236 Se 10th Ave				03	12	سا ك	2013	
	City	State	Zip Code		T	nastie - ID	. 20777074		
	Portland	OR	97214		Iran	saction ID	: 20777074		
	Purpose of Disbursement Contribution			241			D'ala		Dead 1
	Candidate Name			011	Amoun	t of Each [	Disburseme	nt this F	eriod
	Rep. Suzanne Bonamici			Category/ Type				1000	.00
	Office Sought:	nent For:	2014	rype	_	-			
		Primary	General		Contrib	ution			
		Other (spe	ecify) 🔻		30.1111				
	State: OR District: 01								
	Full Name (Last, First, Middle Initial)								
C.	Jim Gerlach For Congress Commit	tee			Date o	f Disburser	ment		
	Mailing Address DO Day 97				03	/ D 1		Y   Y	Υ
	Mailing Address PO Box 87				03	12	نصا ك	2013	_
	City	State	Zip Code		T	notice In	20777000		
	Uwchland	PA	19480		Iran	Saction ID :	: 20777080		
	Purpose of Disbursement Contribution			011					
	Candidate Name			011	Amoun	t of Each [	Disburseme	nt this F	Period
	Rep. James W. Gerlach			Category/ Type				2500	.00
	Office Sought: House Disbursem	nent For:	2014	Type		7	7		
		Primary	General		Contrib	ution			
	President	Other (spe	ecify) 🔻		Johns				
_	State: PA District: 06								
	<u> </u>							-	
5	SUBTOTAL of Disbursements This Page (optional)			·····	. L.	-	7	6000	.00
									-
1	<b>OTAL</b> This Period (last page this line number only).				. L.	-			

SCHEDULE B (FEC Form 3X)	1	FOR LINE	NUMBER: PAGE 84 OF 96
ITEMIZED DISBURSEMENTS	Use separate schedule for each category of the	(oncor only	
	Detailed Summary Pag	ae   L	22 X 23 24 25 26 28a 28b 28c 29 30b
		27	
Any information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , , ,		
American Hospital Association PA	VC		
·			
Full Name (Last, First, Middle Initial)			Data of Dishamanana
A. Alaskans For Begich 2014			Date of Disbursement
Mailing Address PO Box 410			03 12 2013
City	State Zip Code		Transaction ID : 20800136
Palmer Purpose of Disbursement	AK 99645		Transaction 15 : 20000100
Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Sen. Mark P. Begich		Type	1000.00
	ement For: 2014		
X Senate	Primary Genera	al	Contribution
State: AK District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
B. Richard Hanna For Congress Cor	nmittee		Date of Disbursement
	THITIICO C		M M / D D / Y Y Y Y
Mailing Address PO Box 118			03 19 2013
0.1			
City Utica	State Zip Code NY 13503		Transaction ID: 20800143
	10000		
Purpose of Disbursement			
Contribution		011	Amount of Each Disbursement this Period
Contribution  Candidate Name		Category/	
Contribution Candidate Name Rep. Richard Hanna	oment For: 2044		Amount of Each Disbursement this Period 2000.00
Contribution  Candidate Name  Rep. Richard Hanna  Office Sought: House Disburse	ement For: 2014	Category/ Type	2000.00
Contribution  Candidate Name  Rep. Richard Hanna  Office Sought: House Disburse	ement For: 2014  Primary Genera  Other (specify)	Category/ Type	
Contribution  Candidate Name  Rep. Richard Hanna  Office Sought:    House   Disburse   Senate   Disburse   Dis	Primary Genera	Category/ Type	2000.00
Contribution  Candidate Name  Rep. Richard Hanna  Office Sought:  House Senate President  President	Primary Genera	Category/ Type	2000.00 Contribution
Contribution  Candidate Name  Rep. Richard Hanna  Office Sought:    House   Disburse   Senate   President   State: NY District: 22	Primary Genera Other (specify) ▼	Category/ Type	2000.00
Contribution  Candidate Name  Rep. Richard Hanna  Office Sought:    House   Senate   President     State: NY District: 22  Full Name (Last, First, Middle Initial)  C. Steve Israel For Congress Commit	Primary Genera Other (specify) ▼	Category/ Type	2000.00  Contribution  Date of Disbursement
Contribution  Candidate Name  Rep. Richard Hanna  Office Sought:  Senate  President  State: NY  District: 22  Full Name (Last, First, Middle Initial)	Primary Genera Other (specify) ▼	Category/ Type	2000.00  Contribution  Date of Disbursement
Contribution  Candidate Name  Rep. Richard Hanna  Office Sought:    House   Senate   President     State: NY District: 22  Full Name (Last, First, Middle Initial)  C. Steve Israel For Congress Commit	Primary Genera Other (specify) ▼	Category/ Type	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Contribution  Candidate Name  Rep. Richard Hanna  Office Sought:  House Senate President State: NY District: 22  Full Name (Last, First, Middle Initial)  C. Steve Israel For Congress Commitment of the commitmen	Primary General Other (specify) ▼	Category/ Type	2000.00  Contribution  Date of Disbursement
Contribution  Candidate Name  Rep. Richard Hanna  Office Sought:  House Senate President State: NY District: 22  Full Name (Last, First, Middle Initial)  C. Steve Israel For Congress Commitment of the complete of the congress Commitment	Other (specify) ▼  ittee  State Zip Code	Category/ Type	Contribution  Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Contribution  Candidate Name  Rep. Richard Hanna  Office Sought:  Senate President President State: NY District: 22  Full Name (Last, First, Middle Initial)  C. Steve Israel For Congress Commitmed Mailing Address P.O. Box 1400  City Melville Purpose of Disbursement	Other (specify) ▼  ittee  State Zip Code	Category/ Type	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Contribution  Candidate Name  Rep. Richard Hanna  Office Sought:  Senate President State: NY District: 22  Full Name (Last, First, Middle Initial)  C. Steve Israel For Congress Commitmed Mailing Address P.O. Box 1400  City Melville Purpose of Disbursement Contribution	Other (specify) ▼  ittee  State Zip Code	Category/ Type	Contribution  Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Contribution  Candidate Name  Rep. Richard Hanna  Office Sought:  Senate President State: NY District: 22  Full Name (Last, First, Middle Initial)  C. Steve Israel For Congress Commitment of the contribution  City Melville Purpose of Disbursement Contribution  Candidate Name  Rep. Steve J. Israel	Other (specify) ▼  ittee  State Zip Code	Category/ Type al  011 Category/	Contribution  Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Contribution  Candidate Name  Rep. Richard Hanna  Office Sought:  Senate President President State: NY  District: 22  Full Name (Last, First, Middle Initial)  C. Steve Israel For Congress Commitmed  Mailing Address P.O. Box 1400  City Melville Purpose of Disbursement Contribution  Candidate Name  Rep. Steve J. Israel  Office Sought:  House Senate	Other (specify)   ittee  State Zip Code NY 11747  ement For: 2014 Primary General	Category/ Type  al  O11  Category/ Type	Contribution  Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Contribution  Candidate Name  Rep. Richard Hanna  Office Sought:  Senate President  State: NY District: 22  Full Name (Last, First, Middle Initial)  C. Steve Israel For Congress Commi  Mailing Address P.O. Box 1400  City Melville Purpose of Disbursement Contribution  Candidate Name  Rep. Steve J. Israel  Office Sought:  House Senate President  Disburse  Senate President	Other (specify) ▼  ittee  State Zip Code NY 11747	Category/ Type  al  O11  Category/ Type	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Contribution  Candidate Name  Rep. Richard Hanna  Office Sought:  Senate President President State: NY  District: 22  Full Name (Last, First, Middle Initial)  C. Steve Israel For Congress Commitmed  Mailing Address P.O. Box 1400  City Melville Purpose of Disbursement Contribution  Candidate Name  Rep. Steve J. Israel  Office Sought:  House Senate	Other (specify)   ittee  State Zip Code NY 11747  ement For: 2014 Primary General	Category/ Type  al  O11  Category/ Type	Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Contribution  Candidate Name  Rep. Richard Hanna  Office Sought:    Yes   House Senate President	Other (specify) ▼  ittee  State Zip Code NY 11747  ement For: 2014  Primary Genera Other (specify) ▼	Category/ Type  al  O11  Category/ Type  al	Contribution  Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Contribution  Candidate Name  Rep. Richard Hanna  Office Sought:  Senate President  State: NY District: 22  Full Name (Last, First, Middle Initial)  C. Steve Israel For Congress Commi  Mailing Address P.O. Box 1400  City Melville Purpose of Disbursement Contribution  Candidate Name  Rep. Steve J. Israel  Office Sought:  House Senate President  Disburse  Senate President	Other (specify) ▼  ittee  State Zip Code NY 11747  ement For: 2014  Primary Genera Other (specify) ▼	Category/ Type  al  O11  Category/ Type  al	Contribution  Date of Disbursement  M M M / P P P / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 85 OF 96
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(orlean orling	,	
	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30b
Any information copied from such Reports and State	mente mou not be cold or u			
or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				
American Hospital Association PA	C			
·				
Full Name (Last, First, Middle Initial)			Date of Disburseme	nt
A. Jeffries For Congress			M M / D D	/
Mailing Address 630 Washington Avenue			03 19	2013
-				
City Brooklyn	State Zip Code NY 11238		Transaction ID: 2	0800145
Purpose of Disbursement	11230			
Contribution		011	Amount of Each Dis	bursement this Period
Candidate Name		Category/		2000.00
Rep. Hakeem Jeffries		Type		2000.00
	ment For: 2014			
Senate President	Primary General Other (specify) ▼		Contribution	
State: NY District: 08	Other (specify)			
Full Name (Last, First, Middle Initial)				
B. Friends Of Dave Joyce			Date of Disburseme	nt
			M M / D D	/ Y = Y = Y
Mailing Address 320 Kenarden Drive			03 19	2013
City	State Zip Code			
Cleveland	OH 44143		Transaction ID: 2	0800146
Purpose of Disbursement Contribution		044	Assessment of Foods Dis	harman and their Danier
Candidate Name		011	Amount of Each Dis	sbursement this Period
Rep. David Joyce		Category/ Type		1000.00
	ment For: 2014	1,750	,	
Senate	Primary General		Contribution	
President	Other (specify) ▼			
State: OH District: 14				
Full Name (Last, First, Middle Initial)			Date of Disburseme	nt
C. Blaine Luetkemeyer for Congress			M M / D D	/ Y Y Y Y
Mailing Address P.O. BOX 25			03 19	2013
City	State Zip Code MO 65043		Transaction ID: 2	0800188
Holts Summit Purpose of Disbursement	WO 03043			
Contribution		011	Amount of Each Dis	bursement this Period
Candidate Name		Category/		1000.00
Rep. Blaine Luetkemeyer		Type		1000.00
Office Sought: House Disburse	ment For: 2014  Primary General		0 (11 11	
President	Other (specify)		Contribution	
State: MO District: 03	√- (-i:··)/ <b>▼</b>			
SUBTOTAL of Disbursements This Page (optional).		·····		4000.00
TOTAL TI. D				
TOTAL This Period (last page this line number only	')			

SCHEDULE B (FEC Form 3X)		, FOR LINE	NUMBER: PAGE 86 OF 96	
ITEMIZED DISBURSEMENTS	Use separate schedule( for each category of the	(official offiny		
	Detailed Summary Page		22 X 23 24 25 26 28a 28b 28c 29 30	
Any information copied from such Penerte and States	nonto mov not be cold or			_
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan				
NAME OF COMMITTEE (In Full)				
American Hospital Association PA	3			
/ Full Name (Last First Middle Initial)				_
Full Name (Last, First, Middle Initial)  A. Sean Patrick Maloney For Congres	20		Date of Disbursement	
Seatt Fattick Majoriey For Congres	55		M M / D D / Y Y Y	
Mailing Address 18 W Main St			03 19 2013	
0.1	7'- 0-1-			_
City : Beacon	State Zip Code NY 12508		Transaction ID: 20800567	
Purpose of Disbursement	12000			
Contribution		011	Amount of Each Disbursement this Period	
Candidate Name		Category/	2000.00	
Rep. Sean Patrick Maloney  Office Sought:  House Disburser	and Francesco	Туре	2000.00	
	nent For: 2014 Primary General		Cantribution	
President	Other (specify)		Contribution	
State: NY District: 18	, , , , , , , , , , , , , , , , , , ,			
Full Name (Last, First, Middle Initial)				
B. Friends For Jim McDermott			Date of Disbursement	
Mailing Address PO Box 21786			03 19 2013	
Mailing Address FO Box 21760			03 13 2013	
City	State Zip Code		Transaction ID : 20801198	
Seattle	WA 98111		1141154041611115 . 20001100	
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period	
Candidate Name		Category/		
Rep. Jim McDermott		Type	1000.00	
	nent For: 2014			
	Primary General		Contribution	
State: WA District: 07	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				-
C. Grace For New York			Date of Disbursement	
			M M / D D / Y Y Y Y	
Mailing Address 49-04 43rd Ave			03 19 2013	
City	State Zip Code			_
Woodside	NY 11377		Transaction ID: 20801204	
Purpose of Disbursement Contribution				
Candidate Name		011	Amount of Each Disbursement this Period	
Rep. Grace Meng		Category/ Type	2000.00	
Rep. Grace Meng  Office Sought:  House Disburser	nent For: 2014	Category/ Type	2000.00	
	nent For: 2014 Primary General	Type	2000.00  Contribution	
Office Sought: House Senate President Disburser		Type		
Office Sought: House Disburser Senate	Primary General	Type		
Office Sought:  House Senate President State: NY District: 06	Primary General Other (specify) ▼	Type		
Office Sought: House Senate President Disburser	Primary General Other (specify) ▼	Type	Contribution	

SCHEDULE B (FEC Form	Use ser	parate schedule(s)				NUMBER	:		PAG	E 87	OF 9	96	
ITEMIZED DISBURSEMEN	ITS	for each	category of the	'	cnec	k only 21b	one)	<b>X</b> 23	Г	24	25	<u> </u>	26
		Detailed	I Summary Page			27	28a	28	b	28c	29	3	30b
Any information copied from such Report for commercial purposes, other than													
NAME OF COMMITTEE (In Full)	-												
American Hospital Assoc	ciation PAC	0											
Full Name (Last, First, Middle Initial)							Data a	f Dialassa					
A. Pallone For Congress							Date o	f Disbur	seme		YYY	Y	
Mailing Address PO Box 3176							03	J L	19	I L	2013		
City	State	Zip Code				Trans	saction	ID · 2	2080120	5			
Long Branch		NJ	07740				mans	action	. D . Z	.000120			
Purpose of Disbursement Contribution				011		Amoun	t of Eac	h Dis	sbursem	ent this	Period		
Candidate Name				Ca	ategoi	n//			-				7
Rep. Frank Pallone Jr.					Type	y,		- 7			500	00.00	J
Office Sought: House Senate President		nent For: Primary Other (spe	General				Contrib	ution					
State: NJ District: 06													
Full Name (Last, First, Middle Initial)							Data	f Diahum					
B. Louise Slaughter Re-Ele	ction Com	mittee					M = M	f Disbur			YYY	V	
Mailing Address 1150 University Ave, Bldg. 5							03	J L	19	J L	2013		
City Rochester	ξ	State NY	Zip Code 14607				Trans	saction	ID : 2	2080121	6		
Purpose of Disbursement Contribution					011		Δmoun	t of Fac	h Die	ehuream	ant this	Parind	
Candidate Name					_		Amount of Each Disbursement this Period					-	
Rep. Louise McIntosh Sla	aughter				Category/ Type 1000.0					00.00	J		
Office Sought:  House Senate President State: NY District: 25	Disbursen	nent For: Primary Other (spe	General				Contrib	ution					
Full Name (Last, First, Middle Initial)													_
C. Stivers For Congress							Date o	f Disbur	seme		YYY	V	
Mailing Address 4679 Winterset Drive	е						03	J L	19	I. L	2013		
City		State	Zip Code				Trans	saction	ID · 2	2080124	2		
Columbus		ОН	43220				· · · · · ·	ouotioii			-		
Purpose of Disbursement Contribution				Г	011		Amoun	t of Fac	h Dis	sbursem	ent this	Period	
Candidate Name				Ca	ategoi	rv/	7						7
Rep. Steve Stivers					Туре	,		7		- 7	100	00.00	
Office Sought: House Senate President		nent For: Primary Other (spe	General				Contrib	ution					
State: OH District: 15													
SUBTOTAL of Disbursements This Pa	ge (optional)					•		- 7		-,	700	00.00	
											-	-	1

SCHEDULE B (FEC Form 3X)	Han apparets subset 1.1.	NUMBER: PAGE 88 OF 96					
ITEMIZED DISBURSEMENTS	Use separate schedule( for each category of the						
	Detailed Summary Page	27	22 X 23 24 25 2 28a 28b 28c 29 3				
Any information copied from such Reports and State	ments may not be sold or	used by any person	on for the purpose of soliciting contributions				
or for commercial purposes, other than using the na	me and address of any pol	itical committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)							
American Hospital Association PA	C						
Full Name (Last, First, Middle Initial)							
A. AMERIPAC: The Fund for a Great	er America		Date of Disbursement				
Mailing Address 700 Thirteenth Street, NW Suite 600			03 19 2013				
City	State Zip Code		Transaction ID : 20801245				
Washington Purpose of Disbursement	DC 20005						
2013 Contribution		011	Amount of Each Disbursement this Period				
Candidate Name		Category/	5000.00				
AMERIPAC: The Fund for a Great		Туре	5000.00				
Senate President	ment For:    Primary		2013 Contribution				
State: District:							
Full Name (Last, First, Middle Initial)			Date of Dishamourant				
B. Victory Now!			Date of Disbursement				
Mailing Address 10605 Concord Street Suite 202			03 19 2013				
City	•						
Kensington	MD 20895		Transaction ID : 20801250				
Purpose of Disbursement 2013 Contribution		011	Amount of Each Disbursement this Period				
Candidate Name		Category/	2000.05				
Victory Now!		Туре	2000.00				
Office Sought:  House Senate President State:  Disburse	ment For: Primary General Other (specify) ▼		2013 Contribution				
Full Name (Last, First, Middle Initial)							
C. Nolan For Congress Volunteer Co	mmittee		Date of Disbursement				
Mailing Address PO Box 252 40138 Sawmill Rd			03 19 2013				
City	State Zip Code						
Emily	MN 56447		Transaction ID: 20801254				
Purpose of Disbursement							
2012 Contribution		011	Amount of Each Disbursement this Period				
Candidate Name		Category/	2500.00				
Rep. Richard Michael Nolan  Office Sought:  House Disburse	•						
Senate Disburse	Primary General		2012 Contribution				
President	Other (specify)		2012 Contribution				
State: MN District: 08	2012 General D	Debt Re					
SUBTOTAL of Disbursements This Page (optional).			9500.00				
TOTAL This Period (last page this line number only	/)						

	CHEDULE B (FEC Form 3X)	Use sena	arate schedule(s)				IUMBER:	:		PAG	E 89	OF	96
116	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(cr	leck	only 21b	one) 22	<b>X</b> 23		24	25		26
		Detailed	Summary Fage			27	28a	28b		28c	29		30b
	y information copied from such Reports and Statem for commercial purposes, other than using the nam												
	NAME OF COMMITTEE (In Full)	e and addi	ess of any politic	- CO			3011011 00	Titilbution	0 11011	1 00011	00111111	ittoo.	
$\rangle$	American Hospital Association PAC												
	Full Name (Last, First, Middle Initial)												
	Democratic Senatorial Campaign C	Committe	ee				M = M		D /		YY	Y	
	Mailing Address 120 Maryland Avenue, NE						03	-	19	Н	2013	-	
	,	State	Zip Code				Trans	action II	) · 208	801257	7		
	· · · · · · · · · · · · · · · · · · ·	DC	20002		mana	aotion ii	. 200	.01201					
	Purpose of Disbursement 2013 Contribution			0	11		Amoun	t of Each	n Disbu	ursem	ent this	Perio	d
	Candidate Name			Cate	egor	y/				-	1500	00.00	П
	Democratic Senatorial Campaign C		ee		ype .					7	1500	00.00	
		nent For: Primary Other (spe	General Cify) ▼				2013 C	ontributio	n				
						-							
В.	Full Name (Last, First, Middle Initial) Orrin PAC							f Disburs					
	Mailing Address 175 S. West Temple Suite 650						03	/ D	19	Y	2013	Y	
	Salt Lake City	State UT	Zip Code 84101				Trans	saction I	D : 208	301264	4		
	Purpose of Disbursement 2013 Contribution			0	11		Amoun	t of Each	n Disbu	ursem	ent this	Perio	d
	Candidate Name				-		-						
	Orrin PAC			Cate Ty	gory /pe	y'				7	250	00.00	_
		nent For: Primary Other (spe	General cify) ▼	-			2013 C	ontributic	n				
	Full Name (Last, First, Middle Initial)												
_	GOAL PAC: Grassroots Organizing	j, Acting	and Leadin	ıg PA	٩C		Date o	f Disburs	ement		YY	Y	
	Mailing Address PO Box 30344						03		19	L	2013		
	•	State	Zip Code				Trans	saction II	): 208	301273	3		
	Bethesda Purpose of Disbursement	MD	20824										
	2013 Contribution			0	11		Amoun	t of Each	n Disbu	ursem	ent this	Perio	d
	Candidate Name GOAL PAC: Grassroots Organizing, Acting	and Lead	ling PAC	Cate	egory ype	y/	_				100	00.00	
	Office Sought: House Disbursem			.,	,,,,			,		7			
		Primary Other (spe	General cify) ▼				2013 C	ontributio	n				
	State: District:												_
S	UBTOTAL of Disbursements This Page (optional)					<b>&gt;</b>			Ξ	,	1850	0.00	
	OTAL This Period (last page this line number only).					_							T

	CHEDULE B (FEC Form 3X)	Use sena	arate schedule(s)	FOR LINE			PAGE 90 OF 96	
116	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only 21b	one)	23	24 25 26	
		Detailed	Summary Page	27	28a	28b	28c 29 30b	
	y information copied from such Reports and Staten for commercial purposes, other than using the name							
	NAME OF COMMITTEE (In Full)	ic and add	coo or any ponnoc		SOHOIL COTHET		1 duoi1 dominitade.	
	American Hospital Association PAC	C						
	Full Name (Last, First, Middle Initial)							
_	Joe Kennedy For Congress				Date of D	isbursement	:	
	Markey Address BOD Tools				M = M		/ Y Y Y Y Y Y	
	Mailing Address PO Box 590464				03	26	2013	
	•	State	Zip Code		Transac	tion ID : 208	328479	
		MA	02459		Transas		,20110	
	Purpose of Disbursement Contribution			011	Amount of	f Each Disb	ursement this Period	
	Candidate Name			Category/				
	Rep. Joseph A. Kennedy III			Type		7	1000.00	
		nent For: 2 Primary	2014 General		0 (11 (1			
		Other (spe			Contributio	n		
	State: MA District: 04		•					
	Full Name (Last, First, Middle Initial)							
В.	Friends Of John Barrow					isbursement		
	Mailing Address PO Box 1001				03	26	2013	
	City S Augusta	State GA	Zip Code 30903		Transac	tion ID : 20	328482	
	Purpose of Disbursement							
	Contribution  Candidate Name			011	Amount of Each Disbursement this P			
	Rep. John Barrow			Category/ Type			2500.00	
	•	nent For:	2014	туре		,		
		Primary	General					
		Other (spe	cify) ▼					
	State: GA District: 12  Full Name (Last, First, Middle Initial)							
	Hanabusa For Hawaii				Date of D	isbursement	:	
	Tidilabasa F Si Fiawan					/ D D	/ Y Y Y Y Y	
					M M			
	Mailing Address P.O. Box 1416				03	26	2013	
		State	Zip Code		03			
	City S Honolulu	State HI	Zip Code 96806		03	26 tion ID : 208		
	City			011	03 Transac	tion ID : 208	328484	
	City S Honolulu Purpose of Disbursement			011 Category/	03 Transac	tion ID : 208	328484 ursement this Period	
	City S Honolulu Purpose of Disbursement Contribution Candidate Name Rep. Colleen W. Hanabusa	Н	96806	011 Category/ Type	03 Transac	tion ID : 208	328484	
	City Honolulu Purpose of Disbursement Contribution  Candidate Name  Rep. Colleen W. Hanabusa  Office Sought:  House Disbursen	HI nent For: 2	96806	Category/	Transac  Amount of	tion ID: 208	328484 ursement this Period	
	City Honolulu Purpose of Disbursement Contribution  Candidate Name  Rep. Colleen W. Hanabusa  Office Sought:  House Senate  Disbursen	Н	96806  2014  General	Category/	03 Transac	tion ID: 208	328484 ursement this Period	
	City Honolulu Purpose of Disbursement Contribution  Candidate Name  Rep. Colleen W. Hanabusa  Office Sought:  House Senate  Disbursen	nent For: 2	96806  2014  General	Category/	Transac  Amount of	tion ID: 208	328484 ursement this Period	
	City Honolulu Purpose of Disbursement Contribution  Candidate Name Rep. Colleen W. Hanabusa  Office Sought:    House   Disbursen	nent For: 2 Primary Other (spe	96806  2014	Category/ Type	Transac  Amount of	tion ID: 208	328484 ursement this Period 1000.00	
	City Honolulu Purpose of Disbursement Contribution  Candidate Name  Rep. Colleen W. Hanabusa  Office Sought:  House Senate President  Disbursen	nent For: 2 Primary Other (spe	96806  2014	Category/ Type	Transac  Amount of	tion ID: 208	328484 ursement this Period	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
TEMIZED DISBURSEMENTS	for each category of the	(check only	one) 22 🔀 23 🗆 24 🗆 25 🗀 26
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full)			
American Hospital Association PA	С		
Full Name (Last, First, Middle Initial)			Data of Dishamourant
A. Pete King For Congress Committe	е		Date of Disbursement
Mailing Address PO Box 1428			03 26 2013
City	State Zip Code		Transaction ID - 20020405
Seaford	NY 11783		Transaction ID: 20828485
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name			Amount of Each Bisbardonicit this Foriou
Rep. Peter T. King		Category/ Type	2000.00
Office Sought: House Disburse Senate President	ment For: 2014 Primary General Other (specify)		Contribution
State: NY District: 02			
Full Name (Last, First, Middle Initial)			Data of Dishawaanant
B. Friends Of Susan Brooks			Date of Disbursement
Mailing Address 9333 N Meridian Street # 230		03 26 2013	
City Indianapolis	State Zip Code IN 46260		Transaction ID : 20828493
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name			Amount of Each Bisbardonicit this Foriog
Rep. Susan Brooks		Category/ Type	1000.00
	ment For: 2014 Primary General Other (specify)		Contribution
Full Name (Last, First, Middle Initial)			
C. Friends Of Jeanne Shaheen			Date of Disbursement
Mailing Address 105 N State Street			03 26 2013
City	State Zip Code		Transaction ID: 20828494
Concord Purpose of Disbursement	NH 03301		
Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	500.00
Sen. Jeanne Shaheen  Office Sought: House Disburse	ment For: 2014	Туре	300.00
Senate President	Primary General  Other (specify)		Contribution
State: NH District:			
SUBTOTAL of Disbursements This Page (optional)		······	3500.00
TOTAL This Period (last page this line number only	)		

## ľ

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	JMBER: PAGE 92 OF 96				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	·					
	Detailed Summary Page	21b		24 25 26 28c 29 30b				
[		27						
Any information copied from such Reports and State or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full)	no and address of any points	ar committee to	Conort Contributions in City	odon committee.				
American Hospital Association PA	C							
American Hospital Association 1 A	O							
Full Name (Last, First, Middle Initial)								
A. Adam Smith For Congress Comm	ttee		Date of Disbursement					
Mailing Address DO Day 20000			M M / D D /	2042				
Mailing Address PO Box 23626			03 26 2013					
City	State Zip Code		+					
Federal Way	WA 98093		Transaction ID: 208	28495				
Purpose of Disbursement								
Contribution		011	Amount of Each Disbu	rsement this Period				
Candidate Name		Category/		1000.00				
Rep. Adam Smith  Office Sought:  House Disburse	ment For: 2014	Туре	4	7				
Senate Sought.	Primary General		Contribution					
President	Other (specify)		Contribution					
State: WA District: 09	( 1							
Full Name (Last, First, Middle Initial)								
B. Friends Of Mark Warner			Date of Disbursement					
			M = M / D = D /	Y Y Y Y				
Mailing Address 201 North Union Street Suite 300			03 26	2013				
City	State Zip Code		Towns of the ID 1000	20.400				
Alexandria	VA 22314		Transaction ID: 208	28496				
Purpose of Disbursement Contribution		Tau'						
Candidate Name		011	Amount of Each Disbu	irsement this Period				
Sen. Mark Robert Warner		Category/ Type		1000.00				
	ment For: 2014	туре						
∑ Senate	Primary General		Contribution					
President	Other (specify) ▼							
State: VA District:								
Full Name (Last, First, Middle Initial)								
C. Bob Goodlatte For Congress Com	mittee		Date of Disbursement					
Mailing Address P.O. Box 292			03 26	2013				
Mailing Address P.O. Box 292			03 20	2013				
City	State Zip Code		Transaction ID - 200	20.407				
Roanoke	VA 24002		Transaction ID: 208	20497				
Purpose of Disbursement Contribution								
Candidate Name		011	Amount of Each Disbu	rsement this Period				
Rep. Robert W. Goodlatte		Category/ Type		1000.00				
	ment For: 2014	туре	4	7				
Senate Season	Primary General		Contribution					
President	Other (specify) ▼		30041011					
State: VA District: 06								
SUBTOTAL of Disbursements This Page (optional).				3000.00				
TOTAL TIL B								
TOTAL This Period (last page this line number only	)	•••••••						

SCHEDULE B (FEC Form 3X)	Use separate schedule	FOR LINE	PAGE 93 OF 9				
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	ie Concor only	one) 22 X 23 28a 28b	24 25 2 28c 29 3			
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Full Name (Last, First, Middle Initial)							
Kurt Schrader For Congress			Date of Disburseme	ent			
Mailing Address PO Box 3314			03 26 2013				
	State Zip Code OR 97045		Transaction ID : 2	0828498			
Oregon City Purpose of Disbursement	97045						
Contribution		011	Amount of Each Dis	sbursement this Period			
Candidate Name		Category/		5000.00			
Rep. Kurt Schrader  Office Sought:	nent For: 2014	Туре		7			
Senate President	Primary Genera  Other (specify)	ıl	Contribution				
State: OR District: 05							
Full Name (Last, First, Middle Initial)  Hanabusa For Hawaii			Date of Disburseme	ant.			
· Hanabusa For Hawaii							
Mailing Address P.O. Box 1416			03 / 26	2013			
Honolulu	State Zip Code HI 96806		Transaction ID: 2	20828499			
Purpose of Disbursement Contribution		011	Amount of Each Dis	sbursement this Period			
Candidate Name		Category/		4000.00			
Rep. Colleen W. Hanabusa		Type		1000.00			
Senate	nent For: 2014  Primary Genera  Other (specify) ▼	ıl	Contribution				
Full Name (Last, First, Middle Initial)  - Johnson For Congress			Date of Disburseme	ent			
Mailing Address P.O. Box 14496			03 / 26	2013			
,	State Zip Code		Transaction ID : 2	20828500			
Poland Purpose of Disbursement	OH 44514						
Contribution		011	Amount of Each Dis	sbursement this Period			
Candidate Name		Category/		500.00			
Rep. Bill Johnson	ont For: 2244	Туре		000.00			
Senate	nent For: 2014  Primary Genera  Other (specify)	ul	Contribution				
5.5 O11							
SUBTOTAL of Disbursements This Page (optional)		·····		6500.00			
TOTAL This Period (last page this line number only).							

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 94 OF 9	96
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	·	
	Detailed Summary Page	21b		26
		27		30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , ,			_
American Hospital Association PAC	:			
,				
Full Name (Last, First, Middle Initial)				
A. Steve Israel For Congress Committ	ee		Date of Disbursement	
Mailing Address P.O. Box 1400			03 26 2013	
Maining / Idd. 666 1 . O. Box 1400			20 2010	
City	tate Zip Code		Transaction ID: 20828502	
	NY 11747		11ansaction ib . 20020302	
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period	ı
Candidate Name			Amount of Lacif Dispursement this Period	-
Rep. Steve J. Israel		Category/ Type	500.00	
	nent For: 2014	.,,,,		
Senate	Primary General		Contribution	
	Other (specify) ▼			
State: NY District: 03				
Full Name (Last, First, Middle Initial)  B. Mark Takano For Congress			Date of Disbursement	
B. Mark Takano For Congress			M M / D D / Y Y Y Y	
Mailing Address PO Box 5214			03 26 2013	
	tate Zip Code		Transaction ID: 20828504	
Riverside Purpose of Disbursement	CA 92517			
Contribution		011	Amount of Each Disbursement this Period	l
Candidate Name		Category/	4000.00	٦
Rep. Mark Takano		Туре	1000.00	J
	ent For: 2014			
	Primary General		Contribution	
State: CA District: 41	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				_
C. Welch For Congress			Date of Disbursement	
			M M / D D / Y Y Y Y	
Mailing Address PO Box 1682			03 26 2013	
City	tate Zip Code			
	VT 05402		Transaction ID: 20828505	
Purpose of Disbursement				
Contribution		011	Amount of Each Disbursement this Period	]
Candidate Name		Category/	1000.00	Т.
Rep. Peter Welch  Office Sought:	nent For: 2014	Туре		_
	Primary General		Contribution	
	Other (specify)		Contribution	
State: VT District: 00	· 			_
				7
SUBTOTAL of Disbursements This Page (optional)		·····•	2500.00	
TOTAL This Period (last nage this line number only)				1

	CHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)	FOR LINE			PAGE 95 OF 96	
П	EMIZED DISBURSEMENTS	for each	category of the	(check only	22	23	24 25 26	
		Detalled	Summary Page	27	28a	28b	28c 29 30b	
	ny information copied from such Reports and Statem for commercial purposes, other than using the nam							
\ \	NAME OF COMMITTEE (In Full)	ie and add	ress of any politica	ai committee to	Solicit Contin	DULIONS ITON	1 Such committee.	
	American Hospital Association PAC	_						
<u>/</u>	·							
Λ.	Full Name (Last, First, Middle Initial)				Data of D	: -		
Α.	Pascrell For Congress					isbursement		
	Mailing Address P.O. Box 640				03	26	2013	
	City	State	Zip Code					
	Totowa	NJ	07511		Iransac	tion ID : 208	328506	
	Purpose of Disbursement Contribution			011	Amount of	f Each Dish	ursement this Period	
	Candidate Name				Amount of	Lacii Disb	discricit this i chod	
	Rep. William J. Pascrell Jr.			Category/ Type		,	1000.00	
		nent For:						
		Primary Other (spe	General		Contributio	n		
	State: NJ District: 09	Other (spe	City) $\blacktriangledown$					
	Full Name (Last, First, Middle Initial)							
В.	Families For James Lankford				Date of D	isbursement	t	
	Mailing Address PO Box 1639				03	26	2013	
	Walling Address PO Box 1639				03	20	2013	
	City S Bethany	State OK	Zip Code 73008		Transac	tion ID : 20	828507	
	Purpose of Disbursement		73006					
	Contribution			011	Amount of Each Disbursement this Period			
	Candidate Name			Category/	1000.00			
				Typo		40	1000.00	
	Rep. James Paul Lankford			Туре		,	,	
	Office Sought: House Disbursen	nent For:		Туре	Contributio		-,	
	Office Sought: House Senate Disbursen	Primary	General	туре	Contributio	on		
	Office Sought: House Senate Disbursen		General	туре	Contributio	on		
_	Office Sought:  Senate  President  State: OK  District: 05  Full Name (Last, First, Middle Initial)	Primary	General	туре				
C.	Office Sought:    House   Disbursem	Primary	General	туре	Date of D	isbursement		
<u> </u>	Office Sought:  Senate  President  State: OK  District: 05  Full Name (Last, First, Middle Initial)	Primary	General	туре			t / Y Y Y Y 2013	
<b>c</b> .	Office Sought:  State: OK District: 05  Full Name (Last, First, Middle Initial)  Friends Of Jim Clyburn  Mailing Address Post Office Box 12567	Primary Other (spe	General cify) ▼	туре	Date of D	isbursement	/ Y Y Y Y Y	
<b>c</b> .	Office Sought:  State: OK District: 05  Full Name (Last, First, Middle Initial)  Friends Of Jim Clyburn  Mailing Address Post Office Box 12567  City	Primary Other (spe	General cify) ▼  Zip Code	Туре	Date of D	isbursement	2013	
С.	Office Sought:  State: OK District: 05  Full Name (Last, First, Middle Initial)  Friends Of Jim Clyburn  Mailing Address Post Office Box 12567  City S Columbia  Purpose of Disbursement	Primary Other (spe	General cify) ▼	Туре	Date of D	isbursement	2013	
<b>c</b> .	Office Sought:  State: OK District: 05  Full Name (Last, First, Middle Initial)  Friends Of Jim Clyburn  Mailing Address Post Office Box 12567  City S  Columbia  Purpose of Disbursement Contribution	Primary Other (spe	General cify) ▼  Zip Code	011	Date of D	isbursement 26 tion ID : 208	2013	
С.	Office Sought:  Senate President State: OK District: 05  Full Name (Last, First, Middle Initial) Friends Of Jim Clyburn  Mailing Address Post Office Box 12567  City Columbia Purpose of Disbursement Contribution  Candidate Name	Primary Other (spe	General cify) ▼  Zip Code	011 Category/	Date of D	isbursement 26 tion ID : 208	2013	
C.	Office Sought:  State: OK District: 05  Full Name (Last, First, Middle Initial)  Friends Of Jim Clyburn  Mailing Address Post Office Box 12567  City Solumbia  Purpose of Disbursement Contribution  Candidate Name  Rep. James E. Clyburn	Primary Other (spe	General cify) ▼  Zip Code 29211	011	Date of D	isbursement 26 tion ID : 208	2013 828508 ursement this Period	
<b>C</b> .	Office Sought:  State: OK District: 05  Full Name (Last, First, Middle Initial)  Friends Of Jim Clyburn  Mailing Address Post Office Box 12567  City Solumbia  Purpose of Disbursement Contribution  Candidate Name  Rep. James E. Clyburn  Office Sought: House Disbursement	Primary Other (spe	General cify) ▼  Zip Code 29211	011 Category/	Date of D	isbursement 26 tion ID: 208	2013 828508 ursement this Period	
с.	Office Sought:  State: OK District: 05  Full Name (Last, First, Middle Initial)  Friends Of Jim Clyburn  Mailing Address Post Office Box 12567  City State: OS State: OS State: OS State: OS OF STATE: O	Primary Other (spe	General cify)   Zip Code 29211  2014  General	011 Category/	Date of D  M M M 03  Transac  Amount of	isbursement 26 tion ID: 208	2013 828508 ursement this Period	
c.	Office Sought:  State: OK District: 05  Full Name (Last, First, Middle Initial)  Friends Of Jim Clyburn  Mailing Address Post Office Box 12567  City Sought: Sought: Sought: Sought: House Senate Senate Senate Senate Disbursement Contribution  Candidate Name  Rep. James E. Clyburn  Office Sought: House Senate Disbursement Contribution	Primary Other (spe	General cify)   Zip Code 29211  2014  General	011 Category/	Date of D  M M M 03  Transac  Amount of	isbursement 26 tion ID: 208	2013 828508 ursement this Period	
C.	Office Sought:  State: OK District: 05  Full Name (Last, First, Middle Initial)  Friends Of Jim Clyburn  Mailing Address Post Office Box 12567  City State: Of Disbursement Contribution  Candidate Name  Rep. James E. Clyburn  Office Sought: House Senate President  State: SC District: 06	Primary Other (spe	General cify) ▼  Zip Code 29211  2014  General cify) ▼	011 Category/ Type	Date of D  M M M 03  Transac  Amount of	isbursement 26 tion ID: 208	2013 828508 ursement this Period	
C.	Office Sought:  State: OK District: 05  Full Name (Last, First, Middle Initial)  Friends Of Jim Clyburn  Mailing Address Post Office Box 12567  City State: OS State: OS State: OS State: OS OF STATE: O	Primary Other (spe	General cify) ▼  Zip Code 29211  2014  General cify) ▼	011 Category/ Type	Date of D  M M M 03  Transac  Amount of	isbursement 26 tion ID: 208	2013 828508 ursement this Period 1000.00	

# 17

SCHEDULE B (FEC Form 3X)	Han annual and the	FOR LINE NUMBER: PAGE 96 OF					OF 96	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(orleast orling	,	<b>7</b> 00 -	] 04	٦		
	Detailed Summary Page	21b 27	22 28a	23 28b	24 28c	25 29	26 30b	
Any information copied from such Reports and Staten or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full)								
American Hospital Association PAC								
Full Name (Last, First, Middle Initial)			Date of C	)isburseme	nt			
A. Friends Of Dan Maffei			M M	/		Y	Υ	
Mailing Address PO Box 230			03 29 2013  Transaction ID : 20828689					
,	State Zip Code							
Syracuse Purpose of Disbursement	NY 13201							
Void of 01/13 Check		011	Amount o	f Each Dis	bursemer	nt this I	Period	
Candidate Name		Category/				-5000	0.00	
Rep. Daniel B. Maffei Office Sought:  House Disburser	nent For: 2012	Туре		7	7	111		
Senate	Primary General Other (specify) ▼		Void of 01	/13 Check				
State: NY District: 25	2012 General De	ebt Re						
Full Name (Last, First, Middle Initial)								
В.			Date of D	isburseme		Y	Y	
Mailing Address					L			
City	State Zip Code							
Purpose of Disbursement		· · · ·	Amount o	f Each Dis	bursemer	nt this I	Period	
Candidate Name		Category/ Type	y/					
Office Sought: House Disbursen	nent For:	турс		,	7			
	Primary General							
State: District:	Other (specify) ▼							
Full Name (Last, First, Middle Initial)								
C.			Date of D	isburseme				
Mailing Address			M = M	/ D D	/ Y	Y	Y	
City	State Zip Code							
Purpose of Disbursement								
Candidate Name		Category/ Type	Amount o	f Each Dis	bursemer	nt this I	Period	
Office Sought: House Disburser								
Senate   President	Primary General Other (specify) ▼							
State: District:	onidi (apedily) ▼							
CUPTOTAL ( D. )						-5000	00	
SUBTOTAL of Disbursements This Page (optional)		·····•	-	1	7	-3000	.00	
TOTAL This Period (last page this line number only)		·····				139500	.00	